

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42905

**FILED**  
**Jan 11, 2014**  
**Secretary of State**  
**CC2573802089**

**Entity Name:** FIRE RESCUE STATION #52, INCORPORATED

**Current Principal Place of Business:**

4492 BOCAIRE BLVD.  
BOCA RATON, FL 33487

**Current Mailing Address:**

4492 BOCAIRE BLVD.  
BOCA RATON, FL 33487 US

**FEI Number:** 65-0198612

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WARM, STEVEN, ESQ  
BOCA CORPORATE CENTER STE 215  
2101 CORPORATE BLVD  
BOCA RATON, FL 33431 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name ROTHCHILD DORTHY  
Address 17517 VIA CAPRI  
City-State-Zip: BOCA RATON FL 33487

Title DVP  
Name SAMUELS, GAIL  
Address 4492 BOCAIRE BLVD.  
City-State-Zip: BOCA RATON FL 33487

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GAIL SAMUELS

**DVP**

**01/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date