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.

TREASURER

01/11/2018

Date

Electronic Signature of Signing Officer/Director Detail

4492 BOCAIRE BLVD. BOCA RATON, FL 33487

DOCUMENT# N42905

# **Current Mailing Address:**

4492 BOCAIRE BLVD. BOCA RATON, FL 33487 US

# FEI Number: 65-0198612

# 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

### **Officer/Director Detail :**

Title	DP	Title	DVP
Name	ROTHCHILD DORTHY	Name	SAMUELS, GAIL
Address	17517 VIA CAPRI	Address	4492 BOCAIRE BLVD.
City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	BOCA RATON FL 33487

Certificate of Status Desired: No

FILED Jan 11, 2018 Secretary of State CC4445120125

Date

# 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: FIRE RESCUE STATION #52, INCORPORATED