

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716459

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: J.W. DUNN LODGE NO. 37, INC.

**Current Principal Place of Business:**

1049 JULIA DRIVE  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

**Current Mailing Address:**

1049 JULIA DRIVE  
MELBOURNE, FL 32935 US

**New Mailing Address:**

FEI Number: 59-1638054      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GAMIN, ROBERT  
1049 JULIA DRIVE  
MELBOURNE, FL 32935 US

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

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

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: WIEBE, CHARLES  
Address: 1049 JULIA DR  
City-St-Zip: MELBOURNE, FL 32935

Title: S ( ) Delete  
Name: FISHBACK, ALEX  
Address: 1049 JULIA DR  
City-St-Zip: MELBOURNE, FL 32935

Title: TD ( ) Delete  
Name: BICE, BRYAN  
Address: 1049 JULIA DR  
City-St-Zip: MELBOURNE, FL 32935

Title: PD ( ) Delete  
Name: GAMIN, ROBERT  
Address: 1049 JULIA DR  
City-St-Zip: MELBOURNE, FL 32935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: WIEBE, CHARLES  
Address: 1049 JULIA DR  
City-St-Zip: MELBOURNE, FL 32935

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT GAMIN

PD

01/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date