

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723773 (8)

1. Corporation Name

GREATER CLEARWATER AERIE NO. 3452, FRATERNAL ORD
ER OF EAGLES, INC.



Principal Place of Business

Mailing Address

AL ORDER OF EAGLES, INC.
1485 GULF TO BAY BLVD.
CLEARWATER FL 33515

AL ORDER OF EAGLES, INC.
1485 GULF TO BAY BLVD.
CLEARWATER FL 33515

3. Date Incorporated or Qualified 06/29/1972 3a. Date of Last Report 05/01/1995

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 23-7179824 Applied For Not Applicable

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State 27 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country 28 Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

GASKIN, SAXTON R., III
1465 SAN JUAN COURT
CLEARWATER FL 34616

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P WHITEHORN DAVID DELETE
NAME 23 S. FREDRICA
STREET ADDRESS CLEARWATER FL
CITY-ST-ZIP

TITLE S MAIN, RODNEY DELETE
NAME 800 MAIN STREET #393
STREET ADDRESS DUNEDIN FL
CITY-ST-ZIP

TITLE DT BARBER, BERNIE DELETE
NAME 1362 TUSCOLA
STREET ADDRESS CLEARWATER FL
CITY-ST-ZIP

TITLE DT BROWNING, ROBERT DELETE
NAME 511 N. WASHINGTON
STREET ADDRESS CLEARWATER FL
CITY-ST-ZIP

TITLE D FURST, JEFF DELETE
NAME 1349 LOTUS PATH RD.
STREET ADDRESS CLEARWATER FL
CITY-ST-ZIP

TITLE DT SCHMIDT, JOHN DELETE
NAME 1406 LIME ST.
STREET ADDRESS CLEARWATER FL
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P STEVE KELLY Change Addition
1.2 NAME 1201 SEMINOLE BLVD # 352
1.3 STREET ADDRESS LARGO FL 33464
1.4 CITY-ST-ZIP

2.1 TITLE DT WILLIAM SCOTT Change Addition
2.2 NAME 1361 YOUNG ST
2.3 STREET ADDRESS CLEARWATER FL 34616
2.4 CITY-ST-ZIP

3.1 TITLE DT MIKE SANDERS Change Addition
3.2 NAME 1235 S. HIGHLAND BLD 24 # 302
3.3 STREET ADDRESS CLEARWATER FL 34616
3.4 CITY-ST-ZIP

4.1 TITLE DT EDWIN SULEK Change Addition
4.2 NAME 1519 EYNICE
4.3 STREET ADDRESS CLEARWATER FL 34616
4.4 CITY-ST-ZIP

5.1 TITLE DT JASON TILLEY Change Addition
5.2 NAME 1320 MORELAND DR BLD 2 APT 14
5.3 STREET ADDRESS CLEARWATER FL 34624
5.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

0014996

CR2E037 (3/96)