

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733504

FILED
Jun 03, 2010
Secretary of State

Entity Name: PRIDE OF SAINT LUCIE LODGE #1189, IBPOE OF W, INC.

Current Principal Place of Business:

2408 AVENUE M
FORT PIERCE, FL 349541834

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1834
FORT PIERCE, FL 349541834

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POITIER, ROBERT H
306 NORTH 22ND ST.
FORT PIERCE, FL 34950 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: ERD
Name: AARON, DAN
Address: P.O.BOX 701045
City-St-Zip: WABASSO, FL 32970

Title: TEAS
Name: KING, WILLIE
Address: 524 NORTH 19TH ST.
City-St-Zip: FT.PIERCE, FL 34950

Title: LK
Name: DICKERSON, JAMES
Address: 1100 N 35 TH ST
City-St-Zip: FT PIERCE, FL 34947

Title: FS
Name: POITIER, ROBERT
Address: 306 NORTH 22ND STREET
City-St-Zip: FT PIERCE, FL 34950

Title: TRUS
Name: ROBINSON, JAMES
Address: 526 DOUGLAS COURT
City-St-Zip: FT. PIERCE, FL 34950

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: ROBERT H. POITIER

FS

06/03/2010

Electronic Signature of Signing Officer or Director

Date