FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # 733630 (8)

1. Corporation Name

STUART LODGE 2337 OSIA HOUSE CORPORATION, INCORP ORATED

Principal Place of Business	Mailing Address
P.O. BOX 2711 STUART FL 34995-2711	P.O. BOX 2711 STUART FL 34995-2711

3. Date Incorporated or Qualified: 08/20/1975
3a. Date of Last Report: 03/23/1995

2. Principal Place of Business — 21: 812 LINCOLN AVE; 22: Suite, Apt. #, etc.; 23: City & State: STUART, FLORIDA; 24: Zip: 34995; 25: Country: MARTIN

2a. Mailing Address — 26: PO BOX 2711; 27: Suite, Apt. #, etc.; 28: City & State: STUART FLORIDA; 29: Zip: 34995-2711; 30: Country: MARTIN

4. FEI Number: ~~59-1886653~~ 65-0339045 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TABONE, WILLIAM H
1197 SW ITHACA ST
PORT ST LUCIE FL 34983

10. Name and Address of New Registered Agent

81 Name: NO CHANGE
82 Street Address (P.O. Box Number is Not Acceptable):
83:
84 City: 900001848929 -06/04/96--01009--017 FL 65 Zip Code
***61.25

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TABONE, WILLIAM H 1197 SW ITHACA ST PORT ST LUCIE FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT ☐ Change ☐ Addition WILLIAM H. TABONE 1197 S W ITHACA STR PORT ST. LUCIE, FLORIDA O
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VIOLA, VICTOR 105 N. SEWALLS PT. RD. STUART FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VICE-PRESIDENT ☐ Change ☐ Addition SAL RIZZOTTO 231 S.E. MONTEREY AVE STUART, FLORIDA O
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RIZZOTTO, JEAN 231 SE MONTEREY AVE STUART FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	RECORDING SECRETARY ☐ Change ☐ Addition GERALDINE GIUMMO 150 FAIRWINDS DRIVE O STUART, FLORIDA
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GENCO, PAULA 461 S.E. WHITMORE DR. PORT ST LUCIE FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Addition TRUSTEE Christina Viola 105 N. Sewalls Pt. Rd Stuart FL LVAT
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OD RIZZOTTO, SAL 231 SE MONTEREY AVE STUART FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Addition TRUSTEE Vincent Genco 461 SE Whitmore Dr Port St. Lucie FL 34984 VET
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GECKLE, ROSE 702 PORTAGE AVE PORT ST LUCIE FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Addition TRUSTEE Anthony Santoro 6351 SE Lillian Ct Stuart FL 34997 T

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qu certify that the information indicated on this annual report or supplemental annual report is true and a oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execu appears in Block 12 or Block 13 if changed, or on an attachment with an address.

s. I further made under my name

SIGNATURE: KM Tabone PRESIDENT 4/20/96 (407) 878-1024
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)

SEP 96-2-9