

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90027 011 ****61.25

DOCUMENT # 733630

1. Entity Name

STUART LODGE 2337 OSIA HOUSE CORPORATION,
 INCORPORATED



Principal Place of Business

812 LINCOLN AVENUE
 STUART FL 34995

Mailing Address

812 LINCOLN AVENUE
 STUART FL 34995
 P O BOX 2711
 STUART, FL 34995

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE CR2E037 (11/03)

4. FEI Number

65-0339065

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ROSE DIMOLA Financial Secretary
 731 SW ARKANSAS TERRACE
 PORT-SAINT LUCIE FL 34953

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rose DiMola

Rose DiMola

3-12-04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VP Delete
 NAME RUSSO, JOHN
 STREET ADDRESS 908 N. FORK ROAD
 CITY-ST-ZIP STUART FL 34994

TITLE T Delete
 NAME GECKLE, ROSE
 STREET ADDRESS 702 PORTAGE AVE.
 CITY-ST-ZIP PORT SAINT LUCIE FL 34984

TITLE T Delete
 NAME BANCONE, ANTHONY
 STREET ADDRESS 3711 SW WHISPERING SOUND DR.
 CITY-ST-ZIP PALM CITY FL 34990

TITLE T Delete
 NAME BANCONE, PATRICIA
 STREET ADDRESS 3711 SW WHISPERING SOUND DR.
 CITY-ST-ZIP PALM CITY FL 34990

TITLE P Delete
 NAME DIMOLA, JOHN
 STREET ADDRESS 731 SW ARKANSAS TERR
 CITY-ST-ZIP PORT SAINT LUCIE FL 34953

TITLE T Delete
 NAME BAHCONE, PAT
 STREET ADDRESS 3711 SW WHISPERING SOUND DR. PC PL
 CITY-ST-ZIP PALM CITY FL 34990

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Vice President Change Addition
 NAME Jerry Graziano
 STREET ADDRESS 3428 SE. Cobia Way
 CITY-ST-ZIP Stuart, fl. 34997

TITLE Trustee Change Addition
 NAME Matteo Mazzilli
 STREET ADDRESS 3654 SW. Whispering Snd. Dr.
 CITY-ST-ZIP Palm City, FL. 34990

TITLE T Change Addition
 NAME Michael Polito
 STREET ADDRESS 1676 SE. Monarch Club Dr.
 CITY-ST-ZIP Palm City, FL. 34990

TITLE Trustee Change Addition
 NAME Joan Collins
 STREET ADDRESS 1856 Whitemarch Way
 CITY-ST-ZIP Palm City, FL. 34990

TITLE President Change Addition
 NAME John DiMola

TITLE Trustee Change Addition
 NAME Janice Polito
 STREET ADDRESS 1676 SE. Monarch Club Dr.
 CITY-ST-ZIP Palm City, FL. 34990

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rose DiMola

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-04

Date

Daytime Phone #