

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733630

FILED
Jan 31, 2007
Secretary of State

Entity Name: STUART LODGE 2337 OSIA HOUSE CORPORATION, INCORPORATED

Current Principal Place of Business:

731 WS. ARKANSAS TERRACE
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

PO BOX 2711
STUART, FL 34995

New Mailing Address:

FEI Number: 65-0339065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE DIMOLA
731 SW ARKANSAS TERRACE
PORT SAINT LUCIE, FL 34953 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: VP () Delete
Name: GRAZIANO, JERRY
Address: 3428 SE COBIA WAY
City-St-Zip: STUART, FL 34997

Title: FS () Delete
Name: DIMOLA, ROSE
Address: 731 SE ARKANSAS TERR.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T () Delete
Name: ROSETO, JOHN
Address: 10729 HIDDEN BEND WAY
City-St-Zip: WELLINGTON, FL 33414

Title: TR () Delete
Name: MAZZA, ELMER
Address: 7725 SE INDEPENDENCE AVE
City-St-Zip: HOBE SOUND, FL 33544

Title: P () Delete
Name: VASCELLARO, ANDREW
Address: 80 CENTRAL PKWY APT 10
City-St-Zip: STUART, FL 34994

Title: TR () Delete
Name: MAZZA, MARLENE
Address: 7725 SE INDEPENDENCE AVE
City-St-Zip: HOBE SOUND, FL 33544

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: JOHN, RUSSO
Address: 2593 SE MILKY WAY
City-St-Zip: STUART, FL 34994

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

Title: T (X) Change () Addition
Name: JOE, MERENDINE
Address: 3965 NW DEER OAK DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

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

Title: P (X) Change () Addition
Name: PASQUALE, VOLPE
Address: 2974 SW BRIGHTON WAY
City-St-Zip: PALM CITY, FL 34990

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSE DIMOLA

F S

01/31/2007

Electronic Signature of Signing Officer or Director

_____ Date