NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 736482

1. Corporation Name

FRATERNAL ORDER OF EAGLES LAKE WORTH AERIE #3694 INC.

Principal Place of Business

2101 LAKE WORTH ROAD PO BOX 6647 LAKE WORTH FL 33461

2. Principal Place of Business

Mailing Address

2a. Mailing Address

26

2101 LAKE WORTH ROAD PO BOX 6647 LAKE WORTH FL 33461

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90091 011 ****61.25

8 6 4 3 386436 - 90091 - 11

3. Date Incorporated or Qualifed

07/27/1976



| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 4. FEI Number | Applied For | |
|--|--------------------------------|---------------------|-------------|--|----------------------------------|--|--|
| 22 | | 27 | | | 51-0193468 | Not Applicable | |
| City & State | 9 | City & State | | _ | 5. Certificate of Status Desired | \$8.75 Additional | |
| 23 | • | 28 | | | - Opinionic of Orallia Dodalos | Fee Required | |
| Zip | Country | | Country | | 6. Election Campaign Financing | ¬ \$5.00 May Be | |
| 24 | 25 | 2930 | | | Trust Fund Contribution | Added to Fees | |
| | 9. Name and Address of Current | Registered Agent | | _ | 10. Name and Address of New Regi | stered Agent | |
| | | | 81 | Name | | • | |
| BAHR, EDWARD J JR | | | | 82. Street Address (P.O. Box Number is Not Acceptable) | | | |
| 2970 ASHLEY DR E | | | | | | | |
| VILLA D | | | | 83 | | | |
| WEST PALM BCH FL 33415 | | | 84 | City | | 85 Zip Code | |
| WEST FALM BOTTLE SSATS | | | 84 | City | | FL S E S S S S S S S S | |
| 11. Pursuant to the provisions of Sections of 17.0502 and 617.0502, Florida Statutes, the above-named conformation statement of policients and | | | | | | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OFFIC | | |
| TITLE | P | A DELETE | 1.1 TITLE | P | ICK KAMPEN | ☐ Change | |
| NAME | RUDDELL, DAVE | | 1.2 NAME | 1 | ICK RAMPEN | | |
| STREET ADDRESS | 2781 2ND AVE #39 | • | 1.3 STREET | ADDRESS - | 1021 HARE WOULD | r | |
| CITY-ST-ZIP | LAKE WORTH FL 33461 | | 1.4 CITY-S1 | r-zip 4 | SKE WORTH Fl 33461 | | |
| TITLE | VP | ☐ DELETE | 2.1 TITLE | T | FAGO BOIDEROK | Change Addition | |
| NAME | OVERTON, BILL | | 2.2 NAME | | 20 D DANKSIDE GRE | ZN | |
| STREET ADDRESS | 910 DREW ST | | 2.3 STREET | | | | |
| CÎTY ST ZIP | LANTANA FL 33462 | | 2.4 CITY-S | T-ZIP | VI FALM BOUF 1 33 | | |
| TITLE | S | ☐ DELETE | 3.1 TITLE | D | NOBERT TAMES | ☐ Change Addition | |
| NAME | BAHR, ED | | 3.2 NAME | | 2181 BONYUVA RD | • | |
| STREET ADDRESS | 2970 ASHLEY DR E VILLA D | | 3.3 STREET | | 2.1. 0- 1- | e martal | |
| CITY-ST-ZIP | WEST PALM BCH FL 33415 | | 3.4. CITY-S | T-ZIP (| UI MAIM BEACHT FI | 33406 | |
| TITLE | T | ∠ DELETE | 4.1 TITLE | 10 | GEONGE CUISON 181 BENHUUA Rd | ☐ Change 💢 Additio | |
| NAME | MOREAU, DON | | 4. 2 NAME | 12 | IRI BANHUUA Rd | | |
| STREET ADORESS | 515 SO 13TH CT | | 4.3 STREET | TADDRESS 1 | and the first of | 33406 | |
| CITY-ST-ZIP | WEST PALM BCH FL 33415 | | 4.4 CITY-5 | T-ZIP U | EST DALM BEACH F | 22400 | |
| TITLE | D | X DELETE | 5.1 TITLE | 1 | | Change Addition | |
| NAME | BELDEROCK, FRED | • | 5.2 NAME | - | | | |
| STREET ADDRESS | 6469 SEMINOLE DR | | 5.3 STREET | T ADDRESS | | | |
| CITY-ST-ZIP | LANTANA FL 33462 | | 5.4 CITY-5 | T-ZIP | | | |
| TILE | D | ☐ DELETE | 6.1 TITLE | | - | Change Additi | |
| NAME | HILD, ROGER | | 6.2 NAME | | | • | |
| STREET ADDRESS | 910 DREW ST | | 6.3 STREET | TADORESS | | | |
| CITY-ST-ZIP | LANTANA FL 33462 | | 6.4 CITY-5 | T-ZIP | <u>-</u> | | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of 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 apachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

LANTANA FL 33462

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR