

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736482

FILED
May 28, 2009
Secretary of State

Entity Name: FRATERNAL ORDER OF EAGLES LAKE WORTH AERIE #3694 INC.

Current Principal Place of Business:

2101 LAKE WORTH ROAD
PO BOX 6647
LAKE WORTH, FL 33461

New Principal Place of Business:

2101 LAKE WORTH ROAD
LAKE WORTH, FL 33461

Current Mailing Address:

P.O. BOX 6647
LAKE WORTH, FL 33466

New Mailing Address:

2101 LAKE WORTH ROAD
LAKE WORTH, FL 33461

FEI Number: 51-0193468 FEI Number Applied For () FEI Number Not Applicable () 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:

BAHR, EDWARD J JR
2970 ASHLEY DR E
VILLA D
WEST PALM BCH, FL 33415 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: P () Delete
Name: KAMPEN, NEIL H
Address: 1500 LUCERN AVE.
City-St-Zip: LAKE WORTH, FL 33460

Title: S () Delete
Name: BAHR, EDWARD J
Address: 2970 ASHLEY DR. E., VILLA D
City-St-Zip: WEST PALM BEACH, FL 33415

Title: G () Delete
Name: BAHR, RONALD W
Address: 2452 LENA LANE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: M () Delete
Name: SAWYER, WILLIAM A
Address: 3533 WILLIAMS ST.
City-St-Zip: LAKE PARK, FL 33403

Title: T () Delete
Name: SOTHEN, RICHARD
Address: 2457 GABRIEL LANE
City-St-Zip: WEST PALM BEACH, FL 33405

Title: T () Delete
Name: WRIGHT, BOB
Address: 102 LISA LANE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HURLEY, HOOVER
Address: 2910 FRENCH AVE
City-St-Zip: LAKE WORTH, FL 33461

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

Title: G (X) Change () Addition
Name: CALLAHAN, MICHAEL
Address: 1115 NORTH K STREET
City-St-Zip: LAKE WORTH, FL 33460

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD J BAHR

Electronic Signature of Signing Officer or Director

S

05/28/2009

Date