2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N04000005726

1. Entity Name

DAYTONA BEACH SHORES FRATERNAL ORDER OF EAGLES 4469 INC.



FILED

Feb 22, 2006 8:00 am Secretary of State

02-22-2006 90016 032 ****70.00

Principal Place of Business			Mailing Address				. q.v∼				
3516 S. ATL DAYTONA I		E. DRES FL 32118	3516 S. ATLANTIC AVE. DAYTONA BEACH SHORES FL 32118								
2. Principal Place of Business			3. Mailing Address					I ANIII 91911 7977 16711 N	BUH 63161	63941 126.010 41.010 011	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				1st MOORE CR2E037 (10/05)				
City & State			City & State			4. FEI Number NO-T APPLICABLE Applied For Not Applicable					
Zip		Country	Zip C		Country		S. Certificate of Status Desired Service Status Desired Service Status Desired Fee Required Fee Required				
· · · · · · · · · · · · · · · · · · ·	6. Name	and Address of Current	Registered Age	ent	F		7. Name and Add	dress of New Re			
					Nam	e ·					
351	SON, LEF 6 S ATLA (TONA BI	ROY INTIC AVE EACH FL 32118		Stree	Street Address (P.O. Box Number is Not Acceptable)						
27				City	<u> </u>			FL	Zip Code	e	
The above named entity submits this statement for the purpose of changing its registere the obligations of registered agent.						e or registe	ered agent, or both, in	the State of Flor		amiliar with,	and accept
	nona or regist	crea again.									
SIGNATURE	Slanghar houd	or printed name of registered agent	and this if arreteable	(NOTE: D	operator A count of	onat va carre	ed when reinstating)		DATE		
TANESIS OF ART EU.	Siesse work he	•	and the state of t	(1401C.11	ogisterou Agent at	Supromo i priforio	20 Augustions and Augustion (Charles)	To be no value wild being	THE PROPERTY OF		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
STATE OF STATES	FILE NOW	FEE IS \$61.25 May 1, 2006	9.	Election Camp Trust Fund Cor	•	ā 🗀	\$5.00 May Be Added to Fees			Payable ment of S	
10.	L. Congression Control Co.	OFFICERS AND DI	RECTORS		11.		ADDITIONS/CHANG	SES TO OFFICER	S AND DIF	ECTORS IN	10
TITLE	S		1	Delete :	TITLE					☐ Change	Addition
NAME WILSON, LEROY					NAME						
STREET ADDRESS 3516 S. ATLANTIC AVE. CITY-ST-ZIP DAYTONA BEACH SHORES FL 32			118		STREET ADDRE	ss					
TITLE	Р			☐ Delete	TITLE	12				☐ enange	Addition
NAME	WILSON, L	EROY	_	T Delete	NAME	75	BE WOOD	Lv.	, .	onlange	☐ Addition
STREET ADDRESS	4	LANTIC AVE.			STREET ADDRE	ss .	514 5.4	TLANT	4CA	OF	
CITY-ST-ZIP	DAYTONA	BEACH SHORES FL 32	<u> 118</u>		CITY-ST-ZIP	D.A.	SIL S.A. Yton Be	eachst	OFE	(P.L.	32/18
TITLE	T			☐ Delete	TITLE					Change	☐ Addition
NAME STREET ADDRESS	CUTLER, B	EN LANTIC AVE.			NAME Street addre	.					
CITY-ST-ZIP	1	BEACH SHORES FL 32	118		CITY-ST-ZIP	33					
TITLE				☐ Delete	TITLE	1		•••		☐ Change	Addition
NAME			•		NAME	İ				onwigo	
STREET ADDRESS					STREET ADDRE	ss					
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STREET ADDRESS CITY-ST-ZIP					STREET ADDRE	55					
TITLE				☐ Delete	TITLE	-				☐ Change	Addition
NAME				רי הבופום	NAME					onlinge	- Annulion
STREET ADDRESS					STREET ADORE	ss					
CITY-ST-ZIP	<u></u> _				CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 attachprent with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE: