

DOCUMENT # N04000005726

1. Entity Name
DAYTONA BEACH SHORES FRATERNAL ORDER OF
EAGLES 4469 INC.



FILED
Mar 06, 2008 8:00 am
Secretary of State

03-06-2008 90049 036 ****61.25

Principal Place of Business
3516 S. ATLANTIC AVE.
DAYTONA BEACH SHORES, FL 32118

Mailing Address
3516 S. ATLANTIC AVE.
DAYTONA BEACH SHORES, FL 32118

I UNDERSTAND THAT UNLESS OTHERWISE SPECIFIED, ALL INFORMATION ON THIS FORM IS SUBJECT TO THE FOLLOWING:

03032008 Chg-NP CR2E037 (12/08)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REQUARTH, LARRY
3516 S ATLANTIC AVE
DAYTONA BEACH, FL 32118

7. Name and Address of New Registered Agent

Name YUNT Richard
Street Address (P.O. Box Number is Not Acceptable)
3516 S. Atlantic Ave
City Daytona Beach Shores FL Zip Code 32118

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 Richard Yunt DATE March 3, 2008
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

Filing Fee is \$61.25
Due by May 1, 2008

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	S	<input type="checkbox"/> Delete
NAME	REQUARTH, LARRY	
STREET ADDRESS	3516 S. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BEACH SHORES, FL 32118	
TITLE	P	<input type="checkbox"/> Delete
NAME	FRIESNER, TOM	
STREET ADDRESS	3516 S. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BEACH SHORES, FL 32118	
TITLE	T	<input type="checkbox"/> Delete
NAME	WILSON, LEE	
STREET ADDRESS	3516 S. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BEACH SHORES, FL 32118	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	YUNT RICHARD	
STREET ADDRESS	3516 S. ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH, SHORES, FL 32118	
TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BANDY JOE	
STREET ADDRESS	3516 S. ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH, SHORES, FL 32118	
TITLE	T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SETARO MIKE	
STREET ADDRESS	3516 S. ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH, SHORES, FL 32118	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Richard Yunt DATE March 3, 2008 Daytime Phone # 386-767-3337
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

386-767-3337