

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N14292 (9)
1. Corporation Name
4108 AERIE IMMOKALEE, FRATERNAL ORDER OF EAGLES, INC.



Principal Place of Business Mailing Address
403 NEWMARKET ROAD P.O. BOX 5063 IMMOKALEE FL 33934
403 NEWMARKET ROAD P.O. BOX 5063 IMMOKALEE FL 34143-5002

3. Date Incorporated or Qualified 04/09/1986 3a. Date of Last Report 06/17/1996
4. FEI Number 59-2528160 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30
9. Name and Address of Current Registered Agent
TAYLOR, EARL JR. - RET
RT 1 BOX H
SR 848
IMMOKALEE FL 33934
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTINEZ, TERRY	1.2 NAME	AYALA ARMANDO
STREET ADDRESS	1420 N. PEACH ST.	1.3 STREET ADDRESS	895 Tipkins Terr.
CITY-ST-ZIP	IMMOKALEE FL	1.4 CITY-ST-ZIP	Immokalee, FL. 34142
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, ROBERT C	2.2 NAME	SHIPMAN, JERRY F.
STREET ADDRESS	RT #1, LOT 18-A	2.3 STREET ADDRESS	100 Singletary Circle
CITY-ST-ZIP	IMMOKALEE FL	2.4 CITY-ST-ZIP	Immokalee, Fl. 34142
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEEL, KELLY	3.2 NAME	SALISBURY, LESTER
STREET ADDRESS	807 43RD BLVD. WEST	3.3 STREET ADDRESS	100 Singletary Circle
CITY-ST-ZIP	IMMOKALEE FL	3.4 CITY-ST-ZIP	Immokalee, Fl.
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAWSON, RICHARD	4.2 NAME	
STREET ADDRESS	403 NEW MARKET RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	IMMOKALEE FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TAYLOR, EARL JR.	5.2 NAME	
STREET ADDRESS	RT 1 BOX H N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	IMMOKALEE FL	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BETANCOURT, HOMER	6.2 NAME	ALLEN, ROBERT C.
STREET ADDRESS	1205 ORCHID ST.	6.3 STREET ADDRESS	RT 1 LOT 18-A
CITY-ST-ZIP	IMMOKALEE FL	6.4 CITY-ST-ZIP	IMMOKALEE, FL.

14. I do 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 or 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 attachment with an address.

CR2E037 (9/96)