2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733504

Entity Name: PRIDE OF SAINT LUCIE LODGE #1189, IBPOE OF W, INC.

FILED Feb 09, 2017 Secretary of State CC9618622487

Current Principal Place of Business:

2408 AVENUE M

FORT PIERCE, FL 34954

Current Mailing Address:

P.O. BOX 1834

FORT PIERCE, FL 34954

FEI Number: 59-1442836 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KNIGHT, RALPH L 2710 AVENUE Q

FORT PIERCE, FL 34947 US

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: RALPH L. KNIGHT 02/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	ERD	Title	TREASURER
Name	SIMMONS, JONATHAN	Name	DICKERSON, JAMES
Address	701 ATLANTIC AVE	Address	1100 N 35TH STR
City-State-Zip:	FORT PIERCE FL 32947	City-State-Zip:	FT.PIERCE FL 34947

TitleLKTitleFIN. SECRETARYNamePLUMBER, ARCHIENameKNIGHT, RALPHAddress110 N 21ST STAddress2710 AVE Q

City-State-Zip: FT PIERCE FL 34950 City-State-Zip: FT PIERCE FL 34947

Title TRUS Title TRUSTEE

NameLEROY LURRYNameTAYLOR, BERTRAMAddress1908 AVENUE GAddress109 DEVONSHIRE DR.City-State-Zip:FT. PIERCE FL 34950City-State-Zip:FORT PIERCE FL 34947

Title ESTEEMED LEADING KNIGHT Title ESTEEMED LEC. KNIGHT

Name CASMINSKI, NORWOOD D Name MORGAN, J P
Address 420 NORTH 16TH STREET Address 2002 AVE. O

City-State-Zip: FORT PIERCE FL 34947 City-State-Zip: FORT PIERCE FL 34950

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I hereby 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 all other like empowered.

SIGNATURE: RALPH KNIGHT FIN SEC 02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TRUSTEE

Name MIMS, ARSTELL

Address 4004 AVE J

City-State-Zip: FT. PIERCE FL 34947