

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000007611

**Entity Name:** I.O.O.F TALLAHASSEE ENCAMPMENT NO.11, INC.

**Current Principal Place of Business:**

5500 N MONROE ST  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

P O BOX 180188  
TALLAHASSEE, FL 32318

**FEI Number:** 45-5440771

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUIST, JR, EDWARD D  
5500 N MONROE ST  
TALLAHASSEE, FL 32303 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:** EDWARD D BUIST, JR

04/24/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/CP  
Name GIFFORD, WILLIAM  
Address P O BOX 180188  
City-State-Zip: TALLAHASSEE FL 32318

Title TREA  
Name BUIST, EDWARD D JR  
Address P O BOX 180188  
City-State-Zip: TALLAHASSEE FL 32318

Title PCP  
Name WILLENBRINK, JAMES S  
Address P O BOX 180188  
City-State-Zip: TALLAHASSEE FL 32318

*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:** EDWARD D BUIST, JR

TREA

04/24/2024

Electronic Signature of Signing Officer/Director Detail

Date