

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704512

FILED
Mar 30, 2009
Secretary of State

Entity Name: ORANGE BLOSSOM POMONA GRANGE NO. 6 INC.

Current Principal Place of Business:

HISTORICAL SOCIETY BLDG.
5920 SE STETSON ROAD
BELLEVIEW, FL 34420 US

New Principal Place of Business:

Current Mailing Address:

34951 LEARN RD.
LEESBURG, FL 34788548

New Mailing Address:

FEI Number: 23-7214714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOND, EVA J
34951 LEARN RD.
LEESBURG, FL 34788548 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHAMBERS, MARY
Address: 13410 S.E. 175TH ST.
City-St-Zip: WEIRSDALE, FL 32195

Title: S () Delete
Name: BOND, EVA J
Address: 34951 LEARN RD.
City-St-Zip: LEESBURG, FL 34788

Title: T () Delete
Name: GRAY, RUTH G
Address: P.O. BOX 714
City-St-Zip: WEIRSDALE, FL 32195

Title: D () Delete
Name: GRAY, HELEN
Address: 4 OAK HOLLOW DRIVE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D () Delete
Name: TRAWICK, BUNNY
Address: 10131 E BASS CIRCLE
City-St-Zip: INVERNESS, FL 344511463

Title: P () Delete
Name: HUNT, EDWARD
Address: 752 N CITRUS GROVE BLVD.
City-St-Zip: POLK CITY, FL 33868

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MEAD, FRANK C ADD
Address: 597 S CARLO TERR
City-St-Zip: INVERNESS, FL 34453

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: NORTON, THOMAS C ADD
Address: 5541 W MURPHY CT
City-St-Zip: HOMOSASSA, FL 34446

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RUTH G GRAY

T

03/30/2009

Electronic Signature of Signing Officer or Director

Date