

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 25, 2004
Secretary of State**

DOCUMENT# 710853

Entity Name: THE GRAND LODGE OF THE INDEPENDENT ORDER OF ODD FELLOWS OF FLORIDA, INC.

Current Principal Place of Business:

1664 W 42 STREET
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1664 W 42 STREET
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-0302797 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WOLFSON, MORTON
3721 NW 16TH PLACE
GAINESVILLE, FL 32605 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: DGMD () Delete
Name: PIASCCKI, FREDERICK
Address: 140 SANTA ROSA
City-St-Zip: FLORAHOME, FL 32140

Title: GWD () Delete
Name: CAMERON, COLIN M
Address: 200 NE 4 AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

Title: GTD () Delete
Name: MORROW, EDWARD
Address: 904 ALLIEGOOD COURT
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD () Delete
Name: FARRADAZ, ABDO
Address: 1664 W 42ND ST
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: MOLLON, MICHAEL
Address: 3861 SE FAIRWAY W
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PIASCCKI, FREDERICK
Address: 140 SANTA ROSA
City-St-Zip: FLORAHOME, FL 32140

Title: D (X) Change () Addition
Name: CAMERON, COLIN M
Address: 200 NE 4 AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

Title: TD (X) Change () Addition
Name: MORROW, EDWARD
Address: 904 ALLIEGOOD COURT
City-St-Zip: TALLAHASSEE, FL 32303

Title: SD (X) Change () Addition
Name: FARRADAZ, ALDO
Address: 1664 W 42ND ST
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Change () Addition
Name: BLATTER, ERNST K
Address: 3414 ISLAND VIEW DR.
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALDO FARRADAZ

SD

02/25/2004

Electronic Signature of Signing Officer or Director

Date