

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2009
Secretary of State

DOCUMENT# 735901

Entity Name: MARION GRANGE NO. 207, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

EVA BOND
34951 LEARN RD
LEESBURG, FL 34788 US

New Mailing Address:

FEI Number: 23-7328391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Title: D () Delete
Name: STRAUSS, MILDRED
Address: 8745 SE 136TH LN
City-St-Zip: SUMMERFIELD, FL 34491

Title: M () Delete
Name: HAMMOND, RUTH
Address: 9360 SE 173 HYACINTH SR
City-St-Zip: THE VILLAGES, FL 32162

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

Title: D () Delete
Name: MEAD, FRANK
Address: 597 S CARLO TERR
City-St-Zip: INVERNESS, FL 34453

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

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

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: EVA BOND

TS

03/01/2009

Electronic Signature of Signing Officer or Director

_____ Date