

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 26 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 739107 (1)

1. Corporation Name

FRATERNAL ORDER OF EAGLES GREATER MIAMI AERIE #3  
632, INC.

Principal Place of Business

Mailing Address

10755 SW 180TH ST.  
SUITE 65  
MIAMI FL 33157  
US10755 SW 180TH ST.  
SUITE 65  
MIAMI FL 33157-7634  
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City &amp; State

23 Zip

25 Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City &amp; State

28

City &amp; State

29

Zip

30 Country

3. Date Incorporated or Qualified

05/19/1977

3a. Date of Last Report

07/01/1996

4. FEI Number

51-0153195

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐

Yes

☒

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAGEE, RICHARD  
20625 MARLIN RD  
MIAMI FL 33189

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BEHR, RICHARD	
STREET ADDRESS	11402 SW 100 AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ARMSTRONG, ROBERT	
STREET ADDRESS	10521 SW 161ST ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MAGEE, RICHARD	
STREET ADDRESS	20625 MARLIN RD.	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MCADAMS, RICHARD JR	
STREET ADDRESS	15304 SW 103 AVE.	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	MIKKELSON, JERRY	
STREET ADDRESS	8415 SW 107 AVE #160-W	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Graham, Vaughn	
1.3 STREET ADDRESS	10755 SW 180 St. #65	
1.4 CITY-ST-ZIP	MIAMI, FL 33157	
2.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	PERAY, John Claude	
2.3 STREET ADDRESS	20220 Dotlan Rd.	
2.4 CITY-ST-ZIP	MIAMI, FL 33189	
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	MAGEE, Richard	
3.3 STREET ADDRESS	20625 Marlin Rd	
3.4 CITY-ST-ZIP	MIAMI, FL	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Thompson, James	
4.3 STREET ADDRESS	10861 SW 168 St.	
4.4 CITY-ST-ZIP	MIAMI, FL 33157	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Richard O. Behr* RICHARD O. BEHR

01/28/97 305/232-7661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0031313

CR2E037 (9/96)