

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742994

FILED
Apr 19, 2009
Secretary of State

Entity Name: THE FRATERNAL ORDER OF EAGLES, ORMOND BEACH AERIE 3800, INC.

Current Principal Place of Business:

190 S. NOVA RD.
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

190 S. NOVA RD.
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 31-0939827

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKS, DANNY
132 FLOMICH STREET
HOLLY HILL, FL 32117 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: SD () Delete
Name: PARKS, DANNY
Address: 132 FLOMICH STREET
City-St-Zip: DAYTONA BEACH, FL 32117

Title: T () Delete
Name: MULLARKEY, GEORGE
Address: 261 CAPEN STREET
City-St-Zip: ORMOND BEACH, FL 32174

Title: P () Delete
Name: WORTH, BRUCE
Address: PO 642
City-St-Zip: ORMOND BEACH, FL 32175

Title: TR () Delete
Name: HOLBROOK, STEVEN
Address: 1224 FLOMICH AVE
City-St-Zip: HOLLY HILL, FL 32117

Title: T () Delete
Name: LIGHT, DALE
Address: 172 BLUE HERON CIR
City-St-Zip: ORMOND BEACH, FL 32174

Title: T () Delete
Name: TURNER, RICK
Address: P.O. BOX 4317
City-St-Zip: ORMOND, FL 32175

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:

Title: T (X) Change () Addition
Name: HIGBEE, BILL
Address: 1000 WALKER ST LOT 243
City-St-Zip: HOLLY HILL, FL 32117

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: DANNY E PARKS

SD

04/19/2009

Electronic Signature of Signing Officer or Director

Date