

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756713

FILED
Aug 14, 2009
Secretary of State

Entity Name: GRAN LOGIA DE LA FLORIDA, ORDEN CABALLERO DE LA LUZ, INC.

Current Principal Place of Business:

1701-1703 N.W. 17TH AVENUE
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

1701-1703 N.W. 17TH AVENUE
MIAMI, FL 33125

New Mailing Address:

FEI Number: 59-1577006 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RAMIREZ, ALBERTO
1701 NORTHWEST 17 AVENUE
MIAMI, FL 33125 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: VIERA, JOSE
Address: 1701 NW 17TH AVE
City-St-Zip: MIAMI, FL 33125

Title: VD () Delete
Name: ZAMORA, REINEL
Address: 1701 NW 17TH AVE.
City-St-Zip: MIAMI, FL 33125

Title: S () Delete
Name: RAMIREZ, ALBERTO
Address: 1701 NW 17TH AVE.
City-St-Zip: MIAMI, FL 33125

Title: T () Delete
Name: CARU, CARLOS
Address: 1701 NW 17TH AVE.
City-St-Zip: MIAMI, FL 33125

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:

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: JOSE VIERA

D

08/14/2009

Electronic Signature of Signing Officer or Director

Date