

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2008 8:00 am
Secretary of State

06-05-2008 90002 006 ****70.00

DOCUMENT # 761115					
1. Entity Name HUDSON AERIE 3997 FRATERNAL ORDER OF EAGLES, INC.					
Principal Place of Business 6840 BCH BLVD HUDSON, FL 34667 US			Mailing Address 6840 BEACH BLVD HUDSON, FL 34667 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2161116	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MARSHALL, PHILIP M 7510 MARYLAND AVE HUDSON, FL 34667			Name <u>Shannon Sabo</u> Street Address (P.O. Box Number is Not Acceptable) <u>6413 TOWER DRIVE</u> City <u>Hudson</u> FL Zip Code <u>34667</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Shannon Sabo</u> <u>Shannon Sabo</u> <u>6/1/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE P NAME SWISHER, FRED STREET ADDRESS 6216 TOWER DR CITY-ST-ZIP HUDSON, FL 34667	<input checked="" type="checkbox"/> Delete				
TITLE TR NAME LADUKE, DARRELL STREET ADDRESS 11336 RIM ROCK ST CITY-ST-ZIP NEW PORT RICHEY, FL 34654	<input checked="" type="checkbox"/> Delete				
TITLE T NAME MUTH, MICHAEL STREET ADDRESS 7407 ISLANDER LANE CITY-ST-ZIP HUDSON, FL 34667	<input checked="" type="checkbox"/> Delete				
TITLE VP NAME SPLAIN, ROBERT STREET ADDRESS 1115 PINTO CITY-ST-ZIP HUDSON, FL 34669	<input type="checkbox"/> Delete				
TITLE S NAME MARSHALL, PHILIP STREET ADDRESS 1510 MARYLAND AVE CITY-ST-ZIP HUDSON, FL 34667	<input checked="" type="checkbox"/> Delete				
TITLE TR NAME MONGO, GENE STREET ADDRESS 7821 MEDUSA DR CITY-ST-ZIP HUDSON, FL 34667	<input checked="" type="checkbox"/> Delete				
TITLE PRESIDENT NAME MICHAEL ROYAL STREET ADDRESS 5937 BEVERLY DRIVE CITY-ST-ZIP Hudson, FL 34669	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE VICE PRESIDENT NAME DEBORAH BROOKER STREET ADDRESS 5106 ROSEWOOD DRIVE CITY-ST-ZIP NEW PORT RICHEY, FL 34653	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE SECRETARY NAME Shannon Sabo STREET ADDRESS 6413 TOWER DRIVE CITY-ST-ZIP Hudson, FL 34667	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE TREASURER NAME DENNIS CRICK STREET ADDRESS 6526 TOWER DRIVE CITY-ST-ZIP Hudson, FL 34667	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE TRUSTEE NAME DAVE LAMBERT STREET ADDRESS 15012 PEACE BLVD CITY-ST-ZIP Shady Hills, FL 34610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
TITLE JR. PAST PRESIDENT NAME Robert Splain STREET ADDRESS 1115 Pinto CITY-ST-ZIP Hudson, FL 34669	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Shannon Sabo</u> <u>6/1/08</u> <u>727-8637138</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

60044095

Hudson Aerie 3997 Fraternal Order of Eagles, Inc.
6840 Beach Blvd.
Hudson, FL 34667

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Document # 761115

Continued list for #11

Trustee: Additional

Cliff Carncross
6532 Saltwater Blvd.
Hudson, FL 34667

Trustee: Additional

John Kepford
13501 Shadberry Lane
Hudson, FL 34667

Trustee: Additional

Mark Rushing
12715 Figtree Lane
Hudson, FL 34667

Trustee: Additional

Joel Sperry
7211 Bougenville Drive
Port Richey, FL 34668