

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR -7 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 767724 (8)

1. Corporation Name

HOLLY HILL AERIE #4033, FRATERNAL ORDER OF EAGLE
S, INC.

Principal Place of Business

Mailing Address

615 RIDGEWOOD AVENUE
BOX 821
HOLLY HILL FL 32117

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BOX 821
HOLLY HILL FL 32117

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/30/1983

3a. Date of Last Report

05/23/1994

4. FBI Number

59-2258647

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. 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

DUKESHIER, MICHAEL
1025 INDIAN OAKS EAST
HOLLY HILL FL 32117

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	LAFLECHE, DON	2928 BRISTOL LANE	S. DAYTONA FL
V	KLEIN, ROBERT	1267 BUCKEYE	ORMOND BEACH FL
S	DUKESHIER, MICHAEL	1025 INDIAN OAKS E.	HOLLY HILL FL
D	EPISCOPO, MICHAEL	128 GRANADA ST	HOLLY HILL FL
D	CASEY, FRE	2195 ORANGE DR	DAYTONA FL
D	KNIGHT, DON	616 FERN ST	HOLLY HILL FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
P	CASEY, FRED	2195 ORANGE DR.	DAYTONA BEACH, FL. 32124	☒	☐
V	SNYDER, DICK	1540 CULVERHOUSE DR.	HOLLY HILL, FL. 32117	☒	☐
S	DUKESHIER, MICHAEL	1025 INDIAN OAKS E.	HOLLY HILL, FL. 32117	☒	☐
T	EPISCOPO, MICHAEL	128 GRANADA ST.	HOLLY HILL, FL. 32117	☒	☐
D	HANFERT, JOE	727 ACACIA DR.	HOLLY HILL, FL. 32117	☒	☐
D	LAFLECHE, DON	2928 BRISTOL LANE	SOUTH DAYTONA FL. 32119	☒	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Michael Dukeshier MICHAEL DUKESHIER

4-4-95

POY

257-4033

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #