## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 768537** 

FILED Jan 05, 2009 Secretary of State

Entity Name: GOLDEN GATE AERIE 4028, FRATERNAL ORDER OF EAGLES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4111 GREEN BLVD NAPLES, FL 34116 US **Current Mailing Address: New Mailing Address:** 4111 GREEN BLVD NAPLES, FL 34116 US FEI Number: 59-2263083 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROTH, DONALD E 132 LADY PALM DRIVE NAPLES, FL 341046454 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete TERRY, W. STEVE DONOVAN, ALAN G Name: Name: 5048 27TH PL SW Address: 3450 WHITE BLVD Address: City-St-Zip: NAPLES, FL 34116 City-St-Zip: NAPLES, FL 34117 Title: () Delete Title: () Change () Addition NEWTON, ROBERT A Name: Name: Address: 1875 21ST STREET SW Address: City-St-Zip: NAPLES, FL 34117 City-St-Zip: Title: () Delete Title: () Change () Addition CRISS, JOE III Name: Name: 4803 TEAKWOOD DR Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: DONOVAN, ALAN G Name: BOWMAN, RICHARD C. 3450 WHITE BLVD 5330 HICKORY WOOD DRIVE Address: Address: City-St-Zip: NAPLES, FL 34117 City-St-Zip: NAPLES, FL 34119 Title: () Delete Title: (X) Change ( ) Addition BOWMAN, RICHARD C. DAFFRON, LYNN A Name: Name: 5330 HICKORY WOOD DRIVE 3765 13TH AVE SW Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34117 Title: (X) Delete Title: () Change () Addition DAFFRON, LYNN A Name: Name: Address: 3765 13TH AVE SW Address: NAPLES, FL 34117 City-St-Zip: 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: DONALD E ROTH AGEN 01/05/2009