2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# C93000000018

Entity Name: BARTOW COMMANDERY NO. 15, KNIGHTS TEMPLAR

Current Principal Place of Business:

915 MCLEOD ST
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

915 MCLEOD ST
BARTOW, FL 33830

New Mailing Address:

FEI Number: 59-0433020 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEST, JOE K
915 MCLEOD ST
BARTOW, FL 33830 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:	T	( ) Delete
Name:	HOLLAND, BENNJAMIN J	
Address:	1165 N MILL AVE	
City-St-Zip:	BARTOW, FL 33830	
Title:	D	( ) Delete
Name:	HERNANDEZ, ROBERT	
Address:	2055 S. FLORAL AVE	
City-St-Zip:	BARTOW, FL 33830	
Title:	D	( ) Delete
Name:	WARREN, KEITH	
Address:	5540 WOODWIND DRIVE	
City-St-Zip:	LAKELAND, FL 33813	
Title:	D	( ) Delete
Name:	MOORE, TIMOTHY	
Address:	5728 PIPES ROAD	
City-St-Zip:	BARTOW, FL 33830	
Title:	S	( ) Delete
Name:	WEST, JOE K	
Address:	915 MCLEOD ST	
City-St-Zip:	BARTOW, FL 33830	

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:	

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: JOE K WEST SECY 02/09/2009

Electronic Signature of Signing Officer or Director — Date