


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90046 001 ****61.25

DOCUMENT # N00000007835	
1. Entity Name ANCIENT ORDER OF HIBERNIANS IN AMERICA, INC. FATHER PATRICK PEYTON, DIVISION NO. 1 INDIAN	

Principal Place of Business 3484 63 SQUARE VERO BEACH FL 32966-6466	Mailing Address 3484 63 SQUARE VERO BEACH FL 32966-6466
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50012400



1st MOORE CR2E037 (10/04)

2. Principal Place of Business 550 13th PL	3. Mailing Address 550 13th PL
Suite, Apt. #, etc. #4	Suite, Apt. #, etc. #4
City & State VERO BEACH FL	City & State VERO BEACH FL
Zip 32960	Country USA

4. FEI Number 59-3410082	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RICHARDSON, FRANKLYN J 3484 63 SQUARE VERO BEACH FL 32966-1466	7. Name and Address of New Registered Agent Name TERRENCE P. COGGINS Street Address (P.O. Box Number is Not Acceptable) 550 13th PL #4 City VERO BEACH FL Zip Code 32960
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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 TERRENCE P COGGINS	DATE 2/1/05
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**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FS RICHARDSON, FRANKLYN 3484 63 SQUARE VERO BEACH FL 32966-1466 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FS EDGAR CAMP 1536 28th AVE VERO BEACH FL 32960 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LSD SHEEHAN, ROBERT 670-206 E LAKE JARMINE CR VERO BEACH FL 32962 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COGGINS, TERRANCE 550 13 PLACE VERO BEACH FL 32960 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MURPHY, WILLIAM 1285 ADMIRALS WALK VERO BEACH FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M COSTELLO, JOHN 68 ROYAL OAK COURT VERO BEACH FL 32962 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CULLETON, JAMES 70 ROYAL OAK COURT VERO BEACH FL 32962 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Terrence P. Coggins	DATE: 2/1/05
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