

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006850

FILED
Jan 07, 2012
Secretary of State

Entity Name: FRATERNAL ORDER OF EAGLES AERIE #4424, INC.

Current Principal Place of Business:

501 N BENEVA RD
SUITE 636
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

501 N BENEVA RD
SUITE 636
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-0985432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSELL, JERRY J TRUSTEE
8345 BRANDIES CT
SARASOTA, FL 34234 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: PRES
Name: LELAND, JAMES PWP
Address: 1833 UNIVERSITY PL.
City-St-Zip: SARASOTA, FL 34235

Title: JPWP
Name: RADOVICH, MICHAEL PRES
Address: 5725 WHISTLERWOOD DR
City-St-Zip: SARASOTA, FL 34232

Title: VP
Name: VESTRAND, MICHAEL VP
Address: 1048 MARLIN LAKES CIRCLE
City-St-Zip: SARASOTA, FL 34232

Title: SEC
Name: VALENTINE SR, JAMES SEC
Address: 9209 34TH CT E
City-St-Zip: PARRISH, FL 34219

Title: TREA
Name: TEED, ERNEST TREA
Address: 501 N BENEVA RD SUITE 636
City-St-Zip: SARASOTA, FL 34232

Title: TRUS
Name: RUSSELL, JERRY TRUSTEE
Address: 8343 BRANDIES CT.
City-St-Zip: SARASOTA, FL 34232

I hereby 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 all other like empowered.

SIGNATURE: JAMES VALENTINE SR

SEC

01/07/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date