

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000003103

FILED
Sep 30, 2009
Secretary of State

Entity Name: KINGS LODGE #48 INC.

Current Principal Place of Business:

702 N 7TH STREET
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 958
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ADAMS, JOHNNIE L
702 N 7TH STREET
HAINES CITY, FL 33844 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: JOHNNIE L. ADAMS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADAMS, JOHNNIE L
Address: 333 S 14TH STREET
City-St-Zip: HAINES CITY, FL 33844

Title: V () Delete
Name: GISSENDANER, JEFFERY A
Address: 1702 BROXEY COURT
City-St-Zip: WINTER HAVEN, FL 33881

Title: T () Delete
Name: DUBOSE, REGINALD
Address: 213 BETTY AVE
City-St-Zip: DUNDEE, FL 33838

Title: S () Delete
Name: LOMAX, KARNELL
Address: 191 REBECCA DRIVE, NE
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: GISSENDANER, JEFFERY A
Address: 699 BROOKSHIRE DRIVE
City-St-Zip: DAVENPORT, FL 33837

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: JOHNNIE L. ADAMS

P

09/30/2009

Electronic Signature of Signing Officer or Director

Date