## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000003133

FILED Feb 10, 2009 Secretary of State

Entity Name: THE SOVEREIGN ORDER OF ST. JOHN OF JERUSALEM KNIGHTS HOSPITALLER, COMMANDERY OF

NICARAGUA, INC.

Current Principal Place of Business: New Principal Place of Business:

18 DUKE DRIVE 13008 SW 88TH TERRACE LAKE WORTH, FL 33460 US MIAMI, FL 33186 US

Current Mailing Address: New Mailing Address:

18 DUKE DRIVE 13008 SW 88TH TERRACE LAKE WORTH, FL 33460 US 13008 SW 88TH TERRACE MIAMI, FL 33186 US

FEI Number: 20-0976460 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:

CARSON, DOROTHY TURNER, SUZANNE 2811 VILLAGE BLVD. #301

LAKE WORTH, FL 33460 US WEST PALM BEACH, FL 33409 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: SUZANNE TURNER 02/10/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: P ( ) Delete Title: P/D (X) Change ( ) Addition

Name: CARSON, DOROTHY Name: PORTA, ZENOBIA
Address: 18 DUKE DRIVE Address: 13008 SW 88TH TERRACE

City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: PORTA, ZENOBIA Name: GIL, CARLOS A

Address: 13008 SW 88 TERRACE NORTH Address: 15769 SW 91ST STREET

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33196 11

Title: D (X) Delete Title: ( ) Change ( ) Addition
Name: GIL, CARLOS C Name:

 Name:
 GIL, CARLOS C
 Name:

 Address:
 5303 SW 164TH COURT
 Address:

 City-St-Zip:
 MIAMI, FL 33185
 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: ZENOBIA PORTA P/D 02/10/2009