2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006137

FILED Apr 08, 2008 Secretary of State

Entity Name: THE FLORIDA PRIORY OF THE KNIGHTS HOSPITALLERS OF THE SOVEREIGN ORDER OF ST.

JOHN OF JERUSALEM KNIGHTS OF MALTA, THE ECUMENICAL ORDER, INC.

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

700 SOUTH DIXIE HIGHWAY SUITE 107

WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

700 SOUTH DIXIE HIGHWAY SUITE 107 WEST PALM BEACH, FL 33401

FEI Number: 20-3059379 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:

CRENSHAW, KENNETH B ESQ.

1555 PALM BEACH LAKES BOULEVARD
SUITE 920
WEST PALM BEACH, FL 33401 US

CRENSHAW, KENNETH B ESQ.
1109 SOUTH CONGRESS AVENUE
SUITE D
WEST PALM BEACH, FL 33406 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: 04/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 () Change () Addition

 Name:
 CARSON, KEITH
 Name:

 Address:
 P.O.BOX 5686
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33466
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 HINMAN, PHILLIP R
 Name:

 Address:
 1210 GOLDEN POND LN
 Address:

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 CUTTER, RANDAL
 Name:

 Address:
 6761 NW 22ND CT
 Address:

 City-St-Zip:
 MARGATE, FL 33063
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 DURHAM, WILLIAM JR.
 Name:

 Address:
 1420 BLUEBERRY DRIVE
 Address:

 City-St-Zip:
 TITUSVILLE, FL 32780
 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: KEITH CARSON D 04/08/2008