

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011041

FILED
Jan 26, 2009
Secretary of State

Entity Name: NAM KNIGHTS OF AMERICA - WEST PALM BEACH CHAPTER INC.

Current Principal Place of Business:

15591 77TH PLACE N
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

15591 77TH PLACE N
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 20-8592083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ETHERIDGE, CLINTON B
15591 77TH PLACE N
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

LOFF, LONNIE
1170 SW 1ST WAY
BOCA RATON, FL 33486 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: LONNIE LOFF

01/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ETHERIDGE, CLINTON
Address: 15591 77TH PLACE N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V () Delete
Name: GRAVES, BOB
Address: 15170 79TH TER. N
City-St-Zip: NPB, FL 33418

Title: T () Delete
Name: JON, JEF
Address: 303 ALICANTE DR
City-St-Zip: JUNO BEACH, FL 33408

Title: S () Delete
Name: LOFF, LONNIE
Address: 1170 SW 1ST WAY
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: GRAVES, BOB
Address: 15170 79TH TER. N
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T (X) Change () Addition
Name: BURKETT, JOHN
Address: 4291 FOSS ROAD
City-St-Zip: LAKE WORTH, FL 33461

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: LONNIE LOFF

S

01/26/2009

Electronic Signature of Signing Officer or Director

Date