## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06778

FILED Apr 23, 2009 Secretary of State

Entity Name: THE ROYAL ORDER OF PONCE DE LEON CONQUISTADORS, INC.

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

519 MATARES DRIVE 3367 TRINIDAD CT

PUNTA GORDA, FL 33950 US PUNTA GORDA, FL 33950 US

Current Mailing Address: New Mailing Address:

P.O. BOX 510664

PUNTA GORDA, FL 33951 US

FEI Number: 59-2644742 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GERBER, BARRY 511 DEWHURST

PORT CHARLOTTE, FL 33954 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:

NATURE.

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

 Name:
 LOCKHART, RAY
 Name:
 JONES, JAMES G

 Address:
 722 VIA FORMIA
 Address:
 610 VIA FORMIA

City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950

 Name:
 ENGER, ROGER
 Name:
 WELLS, RICHARD

 Address:
 770 KINGFISH
 Address:
 723 VIA FORMIA

City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950

Title: S () Delete Title: S (X) Change () Addition

 Name:
 FITZWATER, MARVIN
 Name:
 YORK, JERRY

 Address:
 2555 SILVER PALM
 Address:
 925 GENOA CT

 Address:
 2555 SILVER PALM
 Address:
 925 GENOA CT

 City-St-Zip:
 NORTH PORT, FL 34288
 City-St-Zip:
 PUNTA GORDA, FL 33950

Title: T ( ) Delete Title: T (X) Change ( ) Addition Name: HOLLIN, CLIVE J Name: FABIAN, STEPHEN M

 Address:
 4484 BELFOUNTAIN
 Address:
 3367 TRINIDAD CT

 City-St-Zip:
 PORT CHARLOTTE, FL 33984
 City-St-Zip:
 PUNTA GORDA, FL 33950

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: WELLS, DICK Name: FITZWATER, MARVIN

 Address:
 723 VIA FORMIA
 Address:
 2555 SILVER PALM

 City-St-Zip:
 PUNTA GORDA, FL 33950T
 City-St-Zip:
 NORTH PORT, FL 34288

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

 Name:
 CLENDENIN, BOB
 Name:
 HAMILTON, GÉNE

 Address:
 519 MATARES DR.
 Address:
 360 CAPRI ISLES CT

 City-St-Zip:
 PUNTA GORDA, FL 33950
 City-St-Zip:
 PUNTA GORDA, FL 33950

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: STEPHEN M FABIAN T 04/23/2009