

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006850

FILED
Jul 23, 2009
Secretary of State

Entity Name: WEST FLORIDA SHRINE CLUB II INC.

Current Principal Place of Business:

4936 WOODMAN DR.
MARIANNA, FL 32448

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 75
MARIANNA, FL 32442

New Mailing Address:

P.O. BOX 785
MARIANNA, FL 32447

FEI Number: 84-1697953 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

CAIN, KEN
4121 HOWARD CIRCLE
MARIANNA, FL 32446 US

Name and Address of New Registered Agent:

MEYER, LAWRENCE R
4660 COLLINS ROAD
MARIANNA, FL 32448 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: LAWRENCE R. MEYER

07/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAIN, KEN
Address: 4121 HOWARD CIR.
City-St-Zip: MARIANNA, FL 32446

Title: VP () Delete
Name: LAWRENCE, RUSTY
Address: 2806 LAWRENCEVILLE RD.
City-St-Zip: COTTONDALE, FL 32431

Title: T () Delete
Name: MAYO, TONY
Address: 2789 GREEN ST.
City-St-Zip: MARIANNA, FL 32446

Title: S () Delete
Name: BOWEN, KEITH
Address: PO BOX 222
City-St-Zip: MALONE, FL 32445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: LAWRENCE, KENDRICK R
Address: 2987 DEKEL STREET
City-St-Zip: MARIANNA, FL 32446

Title: T (X) Change () Addition
Name: MEYER, LAWRENCE R
Address: 4660 COLLINS ROAD
City-St-Zip: MARIANNA, FL 32448

Title: S (X) Change () Addition
Name: LAWRENCE, RUSTY
Address: 2806 LAWRENCEVILLE ROAD
City-St-Zip: COTTONDALE, FL 32431

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: LAWRENCE R. MEYER

T

07/23/2009

Electronic Signature of Signing Officer or Director

Date