

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14358

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** FIVE FLAGS LADIES AUXILIARY #3483 F.O.E., INC.

**Current Principal Place of Business:**

105 KENMORE ROAD  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

105 KENMORE ROAD  
PENSACOLA, FL 32503

**New Mailing Address:**

**FEI Number:** 51-0150423

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCDANEL, KATHLEEN  
1054 LIDMONT STREET  
PENSACOLA, FL 32504 US

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

MCDANEL, KATHLEEN  
1054 LINDMONT STREET  
PENSACOLA, FL 32504 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: KATHLEEN MCDANEL

01/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DSC ( ) Delete  
Name: OMER, MARY F  
Address: 4477 WHISPER CT  
City-St-Zip: PENSACOLA, FL 32504

Title: DT ( ) Delete  
Name: HARTMAN, JEAN,  
Address: 725 EAST OLIVE ROAD  
City-St-Zip: PENSACOLA, FL

Title: DT ( ) Delete  
Name: MCDOWELL, LORRAIN  
Address: 7121 PINE FORREST RD.  
City-St-Zip: PENSACOLA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: KATHLEEN MCDANEL

SECT

01/13/2009

Electronic Signature of Signing Officer or Director

Date