

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19879

FILED
Mar 03, 2011
Secretary of State

Entity Name: OKEECHOBEE AUXILIARY 4137, FRATERNAL ORDER OF EAGLES, INC.

Current Principal Place of Business:

9985 N HWY 441
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

9985 N HWY 441
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 59-2659205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAWRENCE, ELIZABETH A
9985 N HWY 441
OKEECHOBEE, FL 34972 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: EARLEY, LAWANNA
Address: 34638 NE 8TH DRIVE
City-St-Zip: OKEECHOBEE, FL 34972

Title: T
Name: BOYLES, MARJORE
Address: 705 SW 77 TERRACE
City-St-Zip: OKEECHOBEE, FL 34972

Title: VP
Name: SHELFER, MARGIE
Address: 1376 NE 144TH STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: TREA
Name: DUNCAN, JOAN
Address: 11944 N.W. 344TH STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: TRUS
Name: POWELL, SHARRY
Address: 644 NW 110TH STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: TRUS
Name: FRAIL, JUDI
Address: 3012 SE 29TH TERRACE
City-St-Zip: OKEECHOBEE, FL 34974

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH A. LAWRENCE

SECR

03/03/2011

Electronic Signature of Signing Officer or Director

Date