2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90341 007 ****61.25

DOCUMENT # N22746

1. Entity Name
FELLSMERE GRANGE HALL, INC.

50040294

Principal Place of Business	Mailing Address
32 N BROADWAY FELLSMERE, FL 32948 US	P O BOX 186 FELLSMERE, FL 32948-3601

01052005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2885147 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

VANDEVOORDE, RENE' G.
1327 N. CENTRAL AVENUE
SEBASTIAN, FL 32958-3852

7. Name and Address of New Registered Agent

Name: REVIS AKERS
Street Address (P.O. Box Number is Not Acceptable): 111 S. OLEANDER ST.
City: FELLSMERE **FL** Zip Code: 32948

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Revis Akers REVIS AKERS 04.15.05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YURKIEWICZ, PETER 175-S ELM STREET FELLSMERE, FL 32948	■ Delete	D Sherlee Watt 142 S. Cypress St. Fellsmere, Fl. 32948	☐ Change ■ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FLAHERTY, KATHRYN P.O. BOX 276 ROSELAND, FL 329570276	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FLAHERTY, KATHRYN P.O. BOX 276 ROSELAND, FL 329570276	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WINTERMUTE, CHARLES 4725 84TH STREET VERO BEACH, FL 32967	■ Delete	D Luella Cosner 510 Acacia St. Sebastian, F. 32958	☐ Change ■ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AKERS, REVIS 111 S. OLEANDER ST FELLSMERE, FL 32948	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sherlee Watt Sherlee WATT 04.15.05 772-581-8408
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #