2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29595

FILED Aug 04, 2004 Secretary of State

Entity Name: FRATERNAL ORDER OF POLICE, ROBERT L. PITMAN MEMORIAL LODGE 4, INC.

Current Principal Place of Business:				New Principal Pla	New Principal Place of Business:	
P.O.BOX 4 CLEARWA	1267 ATER, FL 3375	8 US				
Current Mailing Address:				New Mailing Add	New Mailing Address:	
P.O.BOX 4 CLEARWA	1267 ATER, FL 3375	8 US				
El Number	: 23-7585972	FEI Number Ap	plied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registe	red Agent:	Name and Addres	ss of New Registered Agent:	
NOESKE, 1390 GUL #404 CLEARW/		7 US				
	named entity s e of Florida.	ubmits this stat	ement for the p	urpose of changing its regist	tered office or registered agent, or both,	
SIGNATUI						
Electronic Signature of Registered Agent				nt	Date	
OFFICER	S AND DIRECT	ORS:		ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	D () ADAMSON, PAT 2209 PALMETTO CLEARWATER,) ST		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip:	D () NOESKE, PAUL 1390 GULF BLV CLEARWATER,			Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address:	S () DONAGAN, KEN 1165 FALCON D DUNEDIN, FL 3	R		Title: Name: Address: City-St-Zip:	() Change () Addition	
λity-St-∠ip:						
City-St-Zip: Fitle: Name: Address: City-St-Zip:		IE LN		Title: Name: Address: City-St-Zip:	() Change () Addition	
itle: lame: lddress:	S () GANNON, JOHN 1015 MARY JAN DUNEDIN, FL 3	IE LN 4698 Delete S IN DR.		Name: Address:	() Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES R. O'NEILL P 08/04/2004