2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30579

FILED Jun 17, 2009 Secretary of State

Entity Name: JIM BILLY BARNES-LODGE #71 INC. FRATERNAL ORDER OF POLICE

Current Principal Place of Business:			New Principal Place of Business:		
	DSDEN ST. DLA, FL 32501	US			
urrent M	lailing Address:		New Maili	ng Addres	s:
O BOX 10 ENSACC		US			
accordan	ce with s. 607.193(2)(b), F.S., the corporation did not receive	·-	e.	Certificate of Status Desired ()
ame and	l Address of Curr	ent Registered Agent:	Name and	Address o	of New Registered Agent:
	ER ROAD	US			
		wite this statement for the number	of changing i	ta ragiatara	al affice an explanation of a second and the second
	named entity subi	mits this statement for the purpose	or changing i	its registere	d office or registered agent, or both
the State	e of Florida.	nits this statement for the purpose	or changing i	its registere	a office of registered agent, or both
the State	e of Florida. RE:	signature of Registered Agent	or changing i	is registere	Date
the State	e of Florida. RE:	ignature of Registered Agent			
the State	e of Florida. RE: Electronic S	signature of Registered Agent RS:			Date
the State IGNATUF FFICERS ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	Electronic S S AND DIRECTOI PD () Del BELL, ROBERT J 3880 BAUER ROAD	Signature of Registered Agent RS: ete 2506 ete	ADDITION Title: Name: Address:	VPD GOSS, ERII 7251 CHAP	Date ES TO OFFICERS AND DIRECTO () Change () Addition (X) Change () Addition K
the State IGNATUF FFICER: tle: ame: ddress:	Electronic S S AND DIRECTOI PD () Del BELL, ROBERT J 3880 BAUER ROAD PENSACOLA, FL 3 TD () Del GOSS, ERIK 7251 CHAPAL ST	Signature of Registered Agent RS: ete 2506 ete 2504 ete	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	VPD GOSS, ERII 7251 CHAP	Date ES TO OFFICERS AND DIRECTO () Change () Addition (X) Change () Addition K AL ST

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: ROBERT J BELL, JR PD 06/17/2009