

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40262

FILED
Jan 21, 2009
Secretary of State

Entity Name: PINELLAS PARK FRATERNAL ORDER OF EAGLES #4250 INC.

Current Principal Place of Business:

3451 63RD AVE N
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

3451 63RD AVE N
PINELLAS PARK, FL 33781

New Mailing Address:

FEI Number: 59-3070432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORNE, VERNON
3451 63RD AVE N
PINELLAS PARK, FL 33781 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: P () Delete
Name: ROE, HOWARD
Address: 3980 54TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: V () Delete
Name: WELLS, RON
Address: 3119 59TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

Title: T () Delete
Name: RUSSELL, STEVE
Address: 4181 69TH AVE. NORTH
City-St-Zip: ST PETERSBURG, FL 33781

Title: T () Delete
Name: MUNCHEL, LARRY
Address: 4505 42ND AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL 33714

Title: T () Delete
Name: WILLIAMS, LARRY
Address: 6860 58TH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: T () Delete
Name: FORDYCE, WAYNE
Address: 4505 42ND AVE. NORTH
City-St-Zip: ST. PETERSBURG, FL 33714

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:

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: VERNON HORNE

SEC

01/21/2009

Electronic Signature of Signing Officer or Director

Date