

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N42002 (8)

1. Corporation Name

FRATERNAL ORDER OF EAGLES, ST. CLOUD AERIE NO. 4  
263, INC.

Principal Place of Business

Mailing Address

1200 PENNSYLVANIA AVE.  
ST. CLOUD FL 34769

1200 PENNSYLVANIA AVE.  
ST. CLOUD FL 34769



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

3. Date Incorporated or Qualified  
02/07/1991

3a. Date of Last Report  
08/11/1995

4. FEI Number  
59-3050344

Applied For  
Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WRIGHT III, HUGH E.  
5151 ALLIGATOR LAKE ROAD  
ST. CLOUD FL 34772

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1006, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 617.0503, Florida Statutes.

SIGNATURE *Joseph R. Tinney* 1/17/96

(Not Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME TINNEY, JOSEPH R.  
STREET ADDRESS 1960 MATHIS ROAD  
CITY-ST-ZIP ST. CLOUD FL 34771

TITLE D ☐ DELETE  
NAME JOHNSON, D. LEE  
STREET ADDRESS 1280 ROCKWOOD DRIVE  
CITY-ST-ZIP ST. CLOUD FL 34771

TITLE D ☐ DELETE  
NAME SEARCH, RICHARD L.  
STREET ADDRESS 1260 ROCKWOOD DRIVE  
CITY-ST-ZIP ST. CLOUD FL

TITLE V ☐ DELETE  
NAME ROBERTSON, DAVID N.  
STREET ADDRESS 6845 BASS HWY.  
CITY-ST-ZIP ST. CLOUD FL

TITLE D ☐ DELETE  
NAME WRIGHT III, HUGH E.  
STREET ADDRESS 5151 ALLIGATOR LAKE ROAD  
CITY-ST-ZIP ST. CLOUD FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Joseph R. Tinney* 1/17/96 (407) 560-3671

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)