

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48429

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Entity Name:** F.O.E. HOLLY HILL AUXILIARY AERIE #4033, FRATERNAL ORDER OF EAGLES, INC.

**Current Principal Place of Business:**

1127 AVENUE  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

1127 AVENUE H  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

1127 AVENUE  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 59-3133921

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COROLE JACOBS  
1127 AVENUE  
ORMOND BEACH, FL 32174 US

**Name and Address of New Registered Agent:**

THERESA HULL  
1225 ARAGON ST  
HOLLY HILL, FL 32117 US

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: THERESA HULL

01/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KEMPF, SUE  
Address: 1424 ATLANTA DR  
City-St-Zip: HOLLY HILL, FL 32117

Title: VD  
Name: WILLIAMS, JOANNE  
Address: 7 BROOKSIDE CIRCLE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD  
Name: JACOBS, CAROLE  
Address: 1127 AVENUE H  
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD  
Name: CONLEY, JANET  
Address: 320 AMERICAN WAY  
City-St-Zip: DAYTONA BEACH, FL 32119

I hereby 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 all other like empowered.

SIGNATURE: SUE KEMPF

PD

01/14/2010

Electronic Signature of Signing Officer or Director

Date