FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

N94000003583 (1)

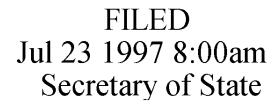
PUNTA GORDA FRATERNAL ORDER OF EAGLES #4331, INC

Principal Place of Business

Mailing Address

252 WEST MARION AVENUE

252 WEST MARION AVENUE





PUNTA GORDA FL 83950		PUNTA GORDA FL 33950-4435			
				3. Date Incorporated or Qualified 07/11/1994	3a. Date of Last Report 08/23/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 65-0509350	Applied For
21 <i>P.O. C</i> Sulte, Apt.	30x 512203	26 P.O. Box 5	12203	03-0309350	Not Applicable
22 27		 		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 PUNT	A GORDA, FL	28 PUNTA GOR	DA, FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip *	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24 33951-2203 25 CHARLOTTE 29 33951-2203 30 CHAR					Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name					
				FRED H. MICHO	<u> </u>
OAKS, DAVID K ESQ. 252 West Marion Avenue				Address (P.O. Box Number is Not Acceptab	le)
PUNTA GORDA FL 33950			83 403	U INDIANA DRIVE	
84 PUNTA GOEDA FL 85 Zip Cod					
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida 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 obligations of, Section 617.0503, Florida Statutes.					
agent. I am familiar with, and accept the obligations of, Section 617/0503, Florida Statutes					
SIGNATURE FRED H. NICHOLS STEED TVICTURE JUL 17 1997					
12.	Signature, typed or printed name of pagislered agent OFRICERS AND		egistered Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	ADDITIONAÇANANGES TO OFFIC	Change Addition
NAME]	NICHOLS, FRED		1.2 NAME		
STREET ADDRESS	4021 INDIANA DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PUNTA GORDA FL 33982		1.4 CITY-ST-ZIP		
TITLE	\$TD	DELETE	2.1 TITLE	STD	Change Addition C
NAME	WAGEL, MIKE		2.2 NAME	KITTELLE, WILLIAM SHELL BLUE	
STREET ADDRESS	672 N. W. DEEDRA STREET	ļ	2.3 STREET ADDRESS	3486 MARISON DA	226 -0
CITY-ST-ZIP	PORT CHARLOTTE FL 33952	- I priere	2. 4 CITY - ST - ZIP	Pt. CHAPLOTTE, Ft	
TITLE NAME	O POTELLE MAILLIAM	☐ DELETE	3.1 TITLE	DINGMAN, JAMES	Li Change M Addition
STREET ADDRESS	KITTELLE, WILLIAM 3486 HARBOR BOULEVARD		3.2 NAME	~	ł
CITY-ST-ZIP	PORT CHARLOTTE FL 33952		3.3 STREET ADDRESS	· /	23000
TITLE	D	DELETÉ	3.4. CITY+ST+ZIP 4.1 TITLE	PUNTA GORDA, FL	- 33982 □ Change ★Addition
NAME	LEEPER, DENNIS	~ ·····	4. 2 NAME	BALY, ROBBET J	
STREET ADDRESS	324-A COOPER ST.		4.3 STREET ADDRESS	DILY, ROBBET J 5445 MAZE OR	•
CITY-ST-ZIP	PUNTA GORDA FL 33982		4.4 CITY-ST-ZIP	PUNTA GORDA PL	33982
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS		ļ	5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME	GEN .		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	with this filing does not qualify 6	6.4 CITY-ST-ZIP	totod in Section 110 07/2VI). Florida Statutos	I further certify that the
14. Ido hereby defility that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 on an attachment with an address.					