

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000004420

FILED
Dec 08, 2008
Secretary of State

Entity Name: FRATERNAL ORDER ORIOLES NEST 283 INC.

Current Principal Place of Business:

304 DEL PRADO BLVD. S
A & B
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

304 DEL PRADO BLVD. S
A & B
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 65-0722241 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GASSETT, TIMOTHY P
11861 PRINCESS GRACE COURT
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

DAVIS, CLIFFORD W
304 DEL PRADO BLVD S
A & B
CAPE CORAL, FL 33990 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: CLIFFORD WAYNE DAVIS

12/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSDT () Delete
Name: GASSETT, TIMOTHY
Address: 11861 PRINCESS GRACE COURT
City-St-Zip: CAPE CORAL, FL 33991

Title: T (X) Delete
Name: RILEY, KURT
Address: 11876 PRINCESS GRACE COURT
City-St-Zip: CAPE CORAL, FL 33991

Title: PSW (X) Delete
Name: GASSETT, KAREN L
Address: 11861 PRINCESS GRACE COURT
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSDT (X) Change () Addition
Name: DAVIS, CLIFFORD W
Address: 304 DEL PRADO BVD S UNIT A&B
City-St-Zip: CAPE CORAL, FL 33990

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: CLIFFORD WAYNE DAVIS

P

12/08/2008

Electronic Signature of Signing Officer or Director

Date