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## NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 27 1997 8:00am Secretary of State

DOCUMENT # N9600006629 (7)  1. Corporation Name  HARRY METZ MEMORIAL LODGE F.O.P. #36, INC.						1 <b>18</b> 11 <b>18</b> 11 <b>1</b> 811 <b>1</b>		
Principal Plac	ce of Business	Mailing Address	<del> </del>			83111 84111 88111 8		
301 NE 38TH ST OAKLAND PARK FL 33334		301 NE 38TH ST OAKLAND PARK FL 33334-2224						
					3. Date incorporated or Qua 12/26/1996	lified 3a. D	Pate of Last I	Report
<del></del> 1	Place of Business	2a. Mailing Address			4. FEI Number		IA	pplied For
21	N	26	<del></del>		23 74854	161		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desire	ed 🔲		Additional equired
City & Stat	le .	City & State			6. Election Campaign Finance	ing	<del></del>	May Be
23		28	<del></del>		Trust Fund Contribution		Added	to Fees
Z <sub>I</sub> p	Country	Zip	Cour	ntry	8. This corporation has liabit	ity for intangible	e tax under	s. 1 <b>9</b> 9.032,
24	25 25 9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes  10. Name and Address of N	Yes		
	A' 11-1110 MIN LINE LANGUAGE OF COLIE			B1 Name	197 - 14001A STIP SANTOND ALL	17514(0) 00	-switt	
LACERRA, RICHARD			-	B2 Street	Address (P.O. Box Number is Not Ac	nontable)	······································	
	38TH ST		{	3(100)	Address it .O. box multiple seemon	ceptable)		
gaklan	ND PARK FL 33334		[1	B3				
•			-	84 City	<del> <u></u></del>		85 Zip	Code
			atutes, the ab vas authorized 3, Florida Statu	ove-named by the corr tes.	corporation submits this statement for correction's board of directors. I hereby			its registered registered
SIGNATURE	Signature typed or printed name of registered ag	geril and title il applicable. (	atutes, the ab vas authorized 3, Florida Statu (NOTE Registered	ove-named by the corp tes. Agent signature	required when reinstating) ADDITIONS/CHANGES TO	r the purpose of accept the app	of changing pointment as D DIRECTO	RS IN 12
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14. I do hereby certify 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 bustee proposed to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address.

SIGNATURE

SKINATURE AND TYPED ON PRINTER NAME OF BIGNING OFFICER OR DIRECTOR

2/12/97

954.561-671