

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004233

FILED
Jan 26, 2009
Secretary of State

Entity Name: ROYAL PALM LODGE NUMBER 439 OF ORLANDO, FLORIDA, INC.

Current Principal Place of Business:

554 W. CHURCH ST.
ORLANDO, FL 32802

New Principal Place of Business:

Current Mailing Address:

PO BOX 550159
ORLANDO, FL 328050159

New Mailing Address:

FEI Number: 59-2777105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBERRY, ROBERT R
3710 LONDONDERRY BLVD
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MORRELL, JOSEPH
Address: 216 HOLIDAY LANE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T () Delete
Name: DEAN, GEORGE N SR
Address: 2800 SEA BREEZE CT
City-St-Zip: ORLANDO, FL 32805

Title: T () Delete
Name: BROWN, CLARENCE B
Address: 1828 PEARLWOOD CT
City-St-Zip: ORLANDO, FL 32818

Title: T () Delete
Name: DEBERRY, ROBERT L
Address: 3710 LONDONDERRY BLVD
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: WATERS, THERON
Address: 7254 PLEASANT DR
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: WILLIAMS, ROOSEVELT
Address: 4288 BOOKER DRIVE
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT R. DEBERRY

T

01/26/2009

Electronic Signature of Signing Officer or Director

Date