

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2005 8:00 am**  
**Secretary of State**

02-09-2005 90060 049 \*\*\*150.00

**DOCUMENT # P01000104444**

1. Entity Name

**FRA TERNAL ORDER OF EAGLES AERIE #4414, INC.**



Principal Place of Business

**77 US HWY 17-92  
DEBARY FL 32713**

Mailing Address

**77 US HWY 17-92  
DEBARY FL 32713**

**20009070**



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-3591631**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COMAS, JUNE M  
77 S HWY 17-92  
DEBARY FL 32713**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee Will Be \$550.00  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HEWITT, SEYMOUR	
STREET ADDRESS	1140 COBBLESTONE AVE.	
CITY-ST-ZIP	DELTONA FL 32725	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	MCKAY, JOSEPH E	
STREET ADDRESS	679 LAKE	
CITY-ST-ZIP	DELTONA FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	LEDUC, ARMAND	
STREET ADDRESS	670 SAGAMORE DR.	
CITY-ST-ZIP	DELTONA FL 32738	
TITLE	TR	<input checked="" type="checkbox"/> Delete
NAME	SWARTZ, WILLIAM G	
STREET ADDRESS	134 SHER LANE	
CITY-ST-ZIP	DEBARY FL 32713	
TITLE	TR	<input checked="" type="checkbox"/> Delete
NAME	WELLS, TREAT	
STREET ADDRESS	134 SHER LANE	
CITY-ST-ZIP	DEBARY FL 32713	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	BLANTH, WILLIAM	
STREET ADDRESS	50 HYDRANGEA LANE	
CITY-ST-ZIP	DEBARY FL 32713	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOE MC KAY	
STREET ADDRESS	479 LAKE MARNIE RD	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEARY BARTH	
STREET ADDRESS	704 MINNESOTA AVE.	
CITY-ST-ZIP	DELAND FL 32724	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TRUSTEE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOE FORTIER	
STREET ADDRESS	14 SURREY RD.	
CITY-ST-ZIP	DEBARY FL 32713	
TITLE	TRUSTEE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAM LARSON	
STREET ADDRESS	1824 OAK ST.	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TREAT WELLS	
STREET ADDRESS	134 SHER LANE	
CITY-ST-ZIP	DEBARY FL 32713	

12. I 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Armand Leduc*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/06/05*

Date

*386-753-0003*

Daytime Phone #