## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

77 US HWY 17-92 DEBARY FL 32713

## **DOCUMENT # P01000104444**

1. Entity Name

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

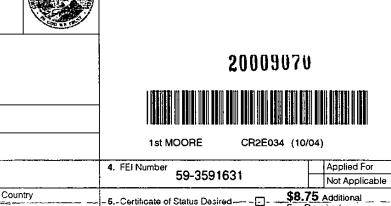
77 US HWY 17-92 DEBARY FL 32713

FRATERNAL ORDER OF EAGLES AERIE #4414, INC.



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

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



6. Name and Address of Current Registered Agent

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

	7. Name and Address of	New Registered Agent	
Name			
Street Addres	ss (P.O. Box Number is Not Acce	pptable)	
City		FL Zip Code	e
ed office or regis	stered agent, or both, in the State		and acc

8. The above named entity submits this statement for the purpose of changing its registere the obligations of registered agent.

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

Country

9. Election Campaign Financing

\$5.00 May Be

Make Check Payable to Florida Department of State								
10.	OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEWITT, SEYMOUR 1140 COBBLESTONE AVE. DELTONA FL 32725	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JOE MC KAY 479 LAKE MAK DELAND FL.	WIE RD 32724	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCKAY, JOSEPH E 679 LAKE DELNAD FL	Delete	THILE NAME STREET ADDRESS TOTYPSTEZIPT	VICE PRESTRATH JOY HINNESOTA DELAND FL.	AVE.	Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEDUC, ARMAND 670 SAGAMORE DR. DELTONA FL 32738	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		حاحا	☐ Change	Addition	
THTLE NAME STREET ADDRESS CITY-ST-ZIP	TR SWARTZ, WILLIAM G 134 SHER LANE DEBARY FL 32713	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTER JOE FORTIER 14 SURREY R.D. DEBARY FL. 3	327/3	<b>∑</b> Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR WELLS, TREAT 134 SHER LANE DEBARY FL 32713	₩ Delete	STREET ADDRESS	TRUSTICE SAN LARSON 1824 OAK ST. DelAND FL, 35		<b>⊠</b> Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLANTH, WILLIAM 50 HYDRANGEA LANE DEBARY FL 32713	Delete	TITLE NAME STREET ADDRESS CFTY-ST-ZIP	TREA SURER TREAT WELLS 134 SHER LAND DOBARY FL.		Change .	☐ Addition	

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:

386-753-0003