

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000104444

FILED
Oct 14, 2009
Secretary of State**Entity Name:** FRATERNAL ORDER OF ORIOLES DEBARY NEST 322, INC.**Current Principal Place of Business:**2995 ENTERPRISE ROAD
DEBARY, FL 32713**New Principal Place of Business:****Current Mailing Address:**2995 ENTERPRISE ROAD
DEBARY, FL 32713**New Mailing Address:****FEI Number:** 59-3591631**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SOBOLEWSKI, FRANK SEC / D
2995 ENTERPRISE ROAD
DEBARY, FL 32713 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: P/D () Delete
Name: WILLIAMS, RANDY
Address: 160 ALDER AVENUE
City-St-Zip: ALTAMINTE SPRINGS, FL 32714

Title: VP/D () Delete
Name: COMAS, RICK
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

Title: S/D () Delete
Name: SOBOLEWSKI, FRANK
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: LEIGHTON, KEN
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: DURSO, RICHARD
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

Title: D () Delete
Name: TOLLEY, JOE
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP/D (X) Change () Addition
Name: BROOKS, CHRIS
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

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

Title: D (X) Change () Addition
Name: HUGHES, FOSTER
Address: 2995 ENTERPRISE ROAD
City-St-Zip: DEBARY, FL 32713

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK SOBOLEWSKI

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10/14/2009

Electronic Signature of Signing Officer or Director

Date