

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000008867

**Entity Name:** THE SOVEREIGN ORDER OF ST. JOHN OF JERUSALEM  
KNIGHTS HOSPITALLER, PRIORY OF THE EASTERN UNITED STATES OF  
AMERICA, INC.

**FILED**  
**Apr 24, 2017**  
**Secretary of State**  
**CC2668559420**

**Current Principal Place of Business:**

2811 VILLAGE BLVD.  
301  
WEST PALM BCH, FL 33409

**Current Mailing Address:**

2811 VILLAGE BLVD.  
#301  
WEST PALM BCH, FL 33409

**FEI Number: 20-0461085**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

TURNER, SUZANNE  
2811 VILLAGE BLVD  
#301  
WEST PALM BEACH, FL 33409 US

*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

**Officer/Director Detail :**

Title            TREASURER  
Name            TURNER, SUZANNE  
Address        2811 VILLAGE BLVD. #301  
City-State-Zip: WEST PALM BEACH FL 33409

Title            SECRETARY  
Name            SCHOFF, JAMES  
Address        3300 ENTERPRISE PARKWAY  
City-State-Zip: BEACHWOOD OH 44122

Title            PRESIDENT  
Name            MILLER, JANET  
Address        6300 COLE STREAM DRIVE  
City-State-Zip: HIGHLANDS HEIGHTS OH 44143

I hereby 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 all other like empowered.

**SIGNATURE: SUZANNE TURNER**

**TREASURER**

**04/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date