

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06778

Entity Name: THE ROYAL ORDER OF PONCE DE LEON CONQUISTADORS, INC.**FILED**
Jan 10, 2014
Secretary of State
CC4283122747**Current Principal Place of Business:**3367 TRINIDAD CT
PUNTA GORDA, FL 33950**Current Mailing Address:**P.O. BOX 510664
PUNTA GORDA, FL 33951 US**FEI Number: 59-2644742****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GERBER, BARRY
511 DEWHURST
PORT CHARLOTTE, FL 33954 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	P
Name	SEXTON, LARRY
Address	3920 BAL HARBOR BLVD
City-State-Zip:	PUNTA GORDA FL 33950

Title	VP
Name	BEILLARGEON, GILL
Address	194 MONOCO ST
City-State-Zip:	PUNTA GORDA FL 33983

Title	S
Name	GILBERT, GARY
Address	2475 GEE
City-State-Zip:	LOWELL MI 49331

Title	T
Name	FABIAN, STEPHEN MJR
Address	3367 TRINIDAD CT
City-State-Zip:	PUNTA GORDA FL 33950

Title	D
Name	SWANFELD, DARREL
Address	625 ANDROS CT
City-State-Zip:	PUNTA GORDA FL 33950

Title	D
Name	JONES, JAMES G
Address	610 VIA FORMIA
City-State-Zip:	PUNTA GORDA FL 33950

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: STEPHEN M FABIAN JR**TREASURER****01/10/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date