

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 08, 2008**  
**Secretary of State**

DOCUMENT# N00038

Entity Name: OCALA CHAPTER 812, E.A.A., INC.

**Current Principal Place of Business:**

5303 SE 35 COURT  
OCALA, FL 34480 US

**New Principal Place of Business:**

**Current Mailing Address:**

5303 SE 35 COURT  
OCALA, FL 34480 US

**New Mailing Address:**

FEI Number: 59-3363746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FIELDHOUSE, WAYNE  
9454 SE 70 TERRACE  
OCALA, FL 34472 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: D ( ) Delete  
Name: KRAL, GERARD  
Address: 8860 SE 72 AVE  
City-St-Zip: OCALA, FL 34472

Title: P ( ) Delete  
Name: FIELDHOUSE, WAYNE  
Address: 8750 SOUTHEAST 70 TERRACE  
City-St-Zip: OCALA, FL 34472

Title: S ( ) Delete  
Name: EKBERG, SCOTT H  
Address: 5303 SE 35 COURT  
City-St-Zip: OCALA, FL 34480

Title: S ( ) Delete  
Name: WEAVER, FREDERICK G  
Address: 8780 SE 70 TERRACE  
City-St-Zip: OCALA, FL 34472

Title: VP ( ) Delete  
Name: WALBRUN, JERRY  
Address: 8520 SE 71 AVE  
City-St-Zip: OCALA, FL 34472

Title: D ( ) Delete  
Name: FAUREAU, PAUL N  
Address: 2251 NE 19 AVE LOT 16  
City-St-Zip: OCALA, FL 34470

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

SIGNATURE: SCOTT H. EKBERG

S

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date