2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726955

FILED Apr 27, 2005 Secretary of State

Entity Name: FLORIDA STATE ELKS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 24175 SE HWY 450 UMATILLA, FL 32784 **Current Mailing Address: New Mailing Address:** PO BOX 49 UMATILLA, FL 32784 FEI Number: 59-0647830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SEIBERT, CARL T 24175 SE HWY 450 UMATILLA, FL 32784 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SEIBERT, CARL T Name: Name: 24175 SE HWY 450 Address: Address: City-St-Zip: UMATILLA, FL 32784 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: COGGINS, JAMES A Name: Address: P.O BOX 3230 Address: City-St-Zip: PENSACOLA, FL 32516 City-St-Zip: Title: () Delete Title: (X) Change () Addition LUIKART, DAVID L SR Name: BRYANT, JOSEPH B Name: 302 SPARROW AVENUE Address: 6324 EDENMORE AVE Address: City-St-Zip: NEW PORT RICHEY, FL 34653 City-St-Zip: SEBRING, FL 33872 Title: () Delete Title: () Change () Addition Name: ELMORE, THOMAS E Name: Address: 1125 S E 21ST ST Address: City-St-Zip: OKEECHOBEE, FL 349742406 City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition NEEDHAM, WINSTON E DON, SANSOUSSI Name: Name: 2139 SE 7TH TERRACE 136 LAKE FRANCIS DRIVE Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: LAKE PLACID, FL 33852 Title: () Delete Title: (X) Change () Addition PALLADINI, FRANK J PHILLIPS, MICHAEL Name: Name: Address: 1550 JUSTIN COURT Address: 4103 W. SWANN AVENUE TITUSVILLE, FL 32796 TAMPA, FL 33609 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CARL T. SEIBERT S 04/27/2005