2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726955

FILED Apr 06, 2007 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:

Title: S () Delete Title: S (X) Change () Addition Name: SEIBERT, CARL T SEIBERT, CARL T

Address: 24175 SE HWY 450 Address: 24175 SE HWY 450
City-St-Zip: UMATILLA, FL 32784 City-St-Zip: UMATILLA, FL 32784 US

 Title:
 T
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 BRYANT, JOSEPH B
 Name:
 BRYANT, JOSEPH B

Address: 302 SPARROW AVENUE Address: 302 SPARROW AVENUE City-St-Zip: SEBRING, FL 33872 City-St-Zip: SEBRING, FL 33872 US

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 ELMORE, THOMAS E
 Name:
 ELMORE, THOMAS E

 Address:
 1125 S E 21ST ST
 Address:
 1855 N.W. FRONTIER DRIVE

 City-St-Zip:
 OKEECHOBEE, FL 349742406
 City-St-Zip:
 LAKE CITY, FL 32055 US

Title: PD () Delete Title: PD (X) Change () Addition Name: SANAOUSSI, DON Name: TRINOWSKI, CHARLES A 56 S. WINTER PARK DRIVE Address: 136 LAKE FRANCIS DRIVE Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: CASSELBERY, FL 32707 US

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: TRINOWSKI, CHARLES Name: LAKE, DAVID B

Address: 56 S WINTER PARK DR Address: POST OFFICE BOX 50369
City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: FORT MYERS, FL 33994 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL T. SEIBERT S 04/06/2007