

FILE NOW: FILING FEE IS \$61.25

FILED

May 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 767581 (2)

1. Corporation Name  
MERRITT ISLAND LODGE #2650 OF THE BENEVOLENT & P ROTECTIVE ORDER OF ELKS, INC.



Principal Place of Business Mailing Address  
1520 AUDUBON RD MERRITT ISLAND FL 32952 US  
P. O. BOX 541052 P.O. BOX 1052 MERRITT ISLANDS FL 32954-1052 US

3. Date Incorporated or Qualified 03/21/1983  
3a. Date of Last Report 04/18/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 1520 Sykes Creek Parkway	26	59-2309274	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Merritt Island, FL	28	<input type="checkbox"/>	
Zip Country	Zip Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24 32952 25 US	29 30		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SCHEITHAUER, JOHH 590 BAKER RD MERRITT ISLAND FL 32953	81 Name Scheithauer, John (spelling) 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	SD
NAME	LUCE, BILLY R.	1.2 NAME	Hobbs, Phyllis
STREET ADDRESS	1520 AUDUBON ROAD	1.3 STREET ADDRESS	1415 Crevalle Avenue
CITY-ST-ZIP	MERRITT ISLAND FL	1.4 CITY-ST-ZIP	Merritt Island, FL 32952
TITLE	TD	2.1 TITLE	
NAME	DENNISON, EDWARD	2.2 NAME	
STREET ADDRESS	2140 WINDSOR DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	2.4 CITY-ST-ZIP	
TITLE	TRD	3.1 TITLE	VD
NAME	SHARP, EDWARD	3.2 NAME	Sharp Edward
STREET ADDRESS	1520 AUDUBON RD	3.3 STREET ADDRESS	1520 Sykes Creek Parkway
CITY-ST-ZIP	MERRITT ISLAND FL	3.4 CITY-ST-ZIP	Merritt Island, FL
TITLE	ERD	4.1 TITLE	TrD
NAME	LESKO, JOHN	4.2 NAME	
STREET ADDRESS	285 VISCOUNT AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	ERD
NAME		5.2 NAME	Michael R. Seleway
STREET ADDRESS		5.3 STREET ADDRESS	1520 Sykes Creek Parkway
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Merritt Island, FL 32952
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 4/24/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)