2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10980

FILED May 01, 2009 Secretary of State

Entity Name: PORT ST. LUCIE LODGE NO. 2658, INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF

THE UNITED STATES OF AMERICA

Current Principal Place of Business: New Principal Place of Business:

2290 LENNARD RD.

PORT SAINT LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

P O BOX 8152

City-St-Zip:

City-St-Zip:

PORT ST. LUCIE, FL 34985

FEI Number: 59-2270892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SIMONELLI, PDD, AUGUSTUS J

PEPE, JOSEPH D E.R. 2911 S E DALHART ROAD 844 SE SWEETBAY AVENUE PORT SAINT LUCIE, FL 349525844 US PORT SAINT LUCIE, FL 34983 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: THOMAS H. DOUGLAS, SECRETARY 05/01/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PORT SAINT LUCIE, FL 34953

TRUS () Delete () Change () Addition

MANNING, MARY ANN Name: Name: 352 N W TUSCANY WAY Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip:

Title: () Delete Title: **TRUS** (X) Change () Addition

NALBANDIAN, SHIRLEY D Name: LENTINE, SAL Name:

Address: 1817 SE RAINIER RD Address: 502 SW EYERLY AVENUE PORT SAINT LUCIE, FL 34952 City-St-Zip: City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: () Delete Title: **TRUS** (X) Change () Addition GRAVIUS, EDWARD W GRAVIUS, EDWARD W Name: Name: 673 SW COLLEGE PARK RD 673 SW COLLEGE PARK RD Address: Address:

() Delete Title: **TRUS** Title: () Change () Addition

Name: CORTAZZO, JOHN Name: 128 COVE VIEW COURT Address: Address: City-St-Zip: STUART, FL 34994 City-St-Zip:

PORT SAINT LUCIE, FL 34953

Title: () Delete Title: **TRUS** (X) Change () Addition

LASALLA, WILLIAM J SR Name: Name: MCKEON, JAMES 126 SE VILLAGE DR 5411 SUNSET BLVD Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: FT. PIERCE, FL 34982

Title: () Delete Title: (X) Change () Addition DOUGLAS, THOMAS H DOUGLAS, THOMAS H SECTY Name: Name: 229 SE VILLAGE DR Address: Address: 229 SE VILLAGE DR PORT SAINT LUCIE, FL 34952 PORT SAINT LUCIE, FL 34952

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.

City-St-Zip:

City-St-Zip:

SIGNATURE: THOMAS H. DOUGLAS SECT 05/01/2009

Electronic Signature of Signing Officer or Director

Date