2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 10, 2009 DOCUMENT# N21810 Secretary of State

Entity Name: SEBASTIAN LODGE, NO. 2714, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE

UNITED STATES OF AMERICA, INC.

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

731 S. FLEMING STREET SEBASTIAN, FL 329782060

Current Mailing Address: New Mailing Address:

731 S. FLEMING STREET SEBASTIAN, FL 329782060

FEI Number: 59-2648978 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:

DELAUDER, CHARLES 831 GLADIOLA AVE. SEBASTIAN, FL 321958 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:

() Delete () Change () Addition DELAUDER, CHARLES Name: Name: 831 GLADIOLA Address: Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: SEC () Delete Title: () Change () Addition EVENS, NADINE Name: Name: Address: 300 TURTLE RUN ROAD #208 Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: TREA () Delete Title: () Change () Addition SIMSO, ANDY Name: Name: Address: 1569 OCEAN COVE ST Address: City-St-Zip: SEBASTIAN, FL 32958 City-St-Zip: Title: TR () Delete Title: () Change () Addition Name: GALIEN, GREG Name: Address: 711 WIMBROW DRIVE Address: City-St-Zip: SEBASTIAN, FL 329584270 City-St-Zip: Title: () Delete Title: () Change () Addition KIRCHMEYER, RAYMOND Name: Name: 7651 GREAT BEARLAKE DR. Address: Address: City-St-Zip: MICCO, FL 32976 City-St-Zip: Title: Title: () Change () Addition () Delete KELLY, TOM Name: Name: Address: 12429 ROSELAND RD Address: SEBASTIAN, FL 32958 City-St-Zip: 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: ANDREW J. SIMSO, III **TREA** 09/10/2009

Electronic Signature of Signing Officer or Director

Date