

2001 UNIFORM BUSINESS REPORT (UBR)

5/2/1

FILED
May 22, 2001 8:00 am
Secretary of State

05-02-2001 90017 023 ****61.25

DOCUMENT # N22010

1. Entity Name

BENEVOLENT & PROTECTIVE ORDER OF THE ELKS PALM C

Principal Place of Business

53 OLD KINGS RD., N.
 PALM COAST FL 32137

Mailing Address

P.O. BOX 352765
 PALM COAST FL 32135-2765

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2669153

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ST ONGE, ALFRED C
 77 FOLCROFT LN
 PALM COAST FL 32137

7. Name and Address of New Registered Agent

Name MICHAEL HANNUS
 Street Address (P.O. Box Number is Not Acceptable) 80 LYNBROOK DR
 City PALM COAST FL 32137

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT BYRNES, DONALD 28 CLARENDON CT S PALM COAST FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TCC COLE, JOHN 109 FARRAGUT DR PALM COAST FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ER KANE, BRUCE 7 CAROLLO CT PALM COAST FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEEN, VERN 35 FILBERT LN PALM COAST FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ST ONGE, ALFRED C 77 FOLCROFT LN PALM COAST FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	FR Raymond Leon 67 Prichard Dr. Palm Coast FL 32164	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Thomas Hoffmann 11 Willow Grove PL Palm Coast, FL 32164	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O Charles McDonald 65 Prichard Dr. Palm Coast, FL 32164	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O Vincent Gough 5 Charles Place Palm Coast FL 32137	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY MICHAEL DONOHUE 80 LYNBROOK DR PALM COAST, FL 32137	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY MICHAEL HANNUS 80 LYNBROOK DR PALM COAST, FL 32137	☒ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with addresses with all possible employees.

SIGNATURE:

MICHAEL HANNUS
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01 (386) 446-2709

Date

Deputy Phone

032E037 (10/00)