2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# N22010

Entity Name: BENEVOLENT & PROTECTIVE ORDER OF THE ELKS PALM COAST LODGE 2709, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 352765
PALM COAST, FL 321352765

New Mailing Address:

FEI Number: 59-2669153 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINN, FRANK
6 ROUND TABLE LANE
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

KAMINSKI, DIANA
8 WAINMONT
PALM COAST, FL 32164 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: DIANA KAMINSKI 04/24/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PINES, GEORGE
Address: 85 W HISPERING PINES DR
City-St-Zip: PALM COAST, FL 32164

Title: D ( ) Delete
Name: LEON, RAYMOND
Address: 67 PRITTHARD DR
City-St-Zip: PALM COAST, FL 32164

Title: VP ( ) Delete
Name: BOILING, JAMES
Address: 145 FLORIDA PARK DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: T ( ) Delete
Name: QUINN, FRANK
Address: 6 ROUND TABLE LANE
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BRAND, THOMAS
Address: 34 OLD OAK DR S.
City-St-Zip: PALM COAST, FL 32137

Title: D (X) Change ( ) Addition
Name: PINES, GEORGE
Address: 85 WHISPERING PINES DR
City-St-Zip: PALM COAST, FL 32164

Title: VP (X) Change ( ) Addition
Name: BRUNO, GARY
Address: 22 WESTOVER LANE
City-St-Zip: PALM COAST, FL 32164

Title: T (X) Change ( ) Addition
Name: TROWBRIDGE, RICHARD
Address: 1 FARRAGUT DR
City-St-Zip: PALM COAST, FL 32137

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: RICHARD TROWBRIDGE T 04/24/2008
Electronic Signature of Signing Officer or Director Date