2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
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 (X)**

Name and Address of Current Registered Agent:

KAMINSKI, DIANA
8 WAINMONT
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

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:

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: DIANA KAMINSKI S 02/18/2009

Electronic Signature of Signing Officer or Director — Date