

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N37792

FILED
Oct 12, 2004
Secretary of State**Entity Name:** CORAL CITY ELKS LODGE NO. 610 AND CORAL CITY TEMPLE NO. 400, IBPOE OF THE
WORLD, INC.**Current Principal Place of Business:**1107 WHITEHEAD STREET
KEY WEST, FL 33040**New Principal Place of Business:****Current Mailing Address:**1107 WHITEHEAD STREET
KEY WEST, FL 33040**New Mailing Address:****FEI Number:** 23-7173929**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROBERTSON, HUGH
215 AMELIA ST # 16
KEY WEST, FL 33040 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: ROBERTSON, HUGH
Address: 800 EMMA ST. APT. 214
City-St-Zip: KEY WEST, FL 33040**Title:** D () Delete
Name: ROBERTSON, DELORES
Address: E23 11TH AVE.
City-St-Zip: KEY WEST, FL 33040**Title:** FS () Delete
Name: SULLIVAN, KEN
Address: 1020 EMMA ST. APT. 4C
City-St-Zip: KEY WEST, FL 33040**Title:** RST () Delete
Name: MENITE, JAMES
Address: 711 CHAPMAN LN.
City-St-Zip: KEY WEST, FL 33040**Title:** HCT () Delete
Name: KELLY, SAMUEL
Address: 208 TRUMAN AVE.
City-St-Zip: KEY WEST, FL 33040**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** FS () Change (X) Addition
Name: SULLIVAN, KEN M FS
Address: 1107 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KEN SULLIVAN

FS

10/12/2004

Electronic Signature of Signing Officer or Director

Date