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Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N37865 (5)
1. Corporation Name

NAPLES LODGE NO. 2010 BENEVOLENT AND PROTECTIVE
ORDER OF ELKS OF THE UNITED STATES OF AMERICA, I



Principal Place of Business Mailing Address
3301 WESTVIEW DR NAPLES FL 33942
3301 WESTVIEW DR NAPLES FL 34104-4040

3. Date Incorporated or Qualified 04/25/1990
3a. Date of Last Report 03/15/1996

2. Principal Place of Business 2a. Mailing Address

4. FEI Number 59-0774251
Applied For Not Applicable

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State 27 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country 28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOZY, ARTHUR L
517 WHITEWATER WAY
NAPLES FL 33962

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE [Signature] DATE 1-15-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DVP DELETE
NAME BRUBAKER, LOGAN W.
STREET ADDRESS 134 BELINA DRIVE
CITY-ST-ZIP NAPLES FL
TITLE D DELETE
NAME RICHMOND, ROBERT SR
STREET ADDRESS 3632 BOCA CIEGA DR
CITY-ST-ZIP NAPLES FL
TITLE D DELETE
NAME CONROY, RONNIE P
STREET ADDRESS 624 98TH AVE., NORTH
CITY-ST-ZIP NAPLES FL
TITLE T DELETE
NAME CASSIDY, JOSEPH
STREET ADDRESS 1329 NARITA WAY
CITY-ST-ZIP NAPLES FL 33942
TITLE D DELETE
NAME GRESHAM, ROBERT
STREET ADDRESS 2449 QUEENS WAY
CITY-ST-ZIP NAPLES FL
TITLE LK DELETE
NAME COBB, KENNETH
STREET ADDRESS 42 SKYWAY DRIVE
CITY-ST-ZIP NAPLES FL 33962

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME CONROY, RONNIE P.
3.3 STREET ADDRESS 505 Mandell Dr. - 108
3.4 CITY-ST-ZIP Naples, Florida 34104
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE 1-15-97 941-643-1367
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0089081

CR2E037 (9/96)