## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

May 09 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

N48066

(7)

LANTANA-BOYNTON LODGE, NO. 2676, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF

| PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF |   |   |   |  |                            |  |   |  |
|--|---|---|---|--|----------------------------|--|---|--|
| Principal Place of Business                      |   | Mailing Address                               |   |  | JUNIO DOLLO DILLO BEAR DID | IN BUDAL BEGER BUBIK BUBI                    |   |  |
| 112 N DIXIE HWY<br>LANTANA FL 33462              |   | PO BOX 861<br>BOYNTON BCH FL 33425-0861<br>US |   |  |                            |  |   |  |
|  |   |   |   | 3. Date Incorporated 03/31/1992            | or Qualified 3a            | Date of Last Re<br>05/24/199                 | port<br>6                               |  |
| 2. Principal P                                   | lace of Business  | 2a. Mailing Address<br>26                     | ——————————————————————————————————————                      |  | 4. FEI Number 59-235 1656  |  | olied For<br>Applicable                 |  |
| Sulte, Apt. #, etc.                              |   | Suite, Apt. #, etc.                           |   | 5. Certificate of Status                   | s Desired 🔲                | S8.75 Additional Fee Required                |   |  |
| City & State                                     |   | City & State                                  |   | 6. Election Campaign<br>Trust Fund Contrib |                            | \$5.00 May Be Added to Fees                  |   |  |
| Zip<br>24  |   |   | Country  8. This corporation has liability Florida Statutes |  |                            | for intangible tax under s. 199.032,  Yes No |   |  |
| <del>                                    </del>  | 9. Name and Address of Curren   |   | 1901  | 10. Name and Addres                        |                            |  |   |  |
| STRAUS   |   |   | 81 Nam<br>82 Stree  | t Address (P.O. Box Number is              | Not Acceptable)            |  |   |  |
|  | IXIE HWY<br>A FL 33462  |   | 83  |  |                            |  |   |  |
|  |   |   | 84 City   |  |                            | FL 85 Zip C                                  |   |  |
| office or r<br>agent. I a<br>SIGNATURE           | to the provisions of Sections 617.050 egistered agent, or both, in the State on familiar with, and accept the obliging the STRAU Signature, typed or printed name of registered agent |   |   | prporation's board of directors. I         | hereby accept the          | appointment as re                            | egistered                               |  |
| 12.  | OFFICERS AN   |   | 18.   | ADDITIONS/CHANG                            | ES TO OFFICERS             |  |   |  |
| TITLE  | PD  | DELETE  | 1.1 TITLE   | PD   |                            | Change                                       | Addition                                |  |
| NAME   | DALASASS, DENNIS  |   | 1.2 NAME  | ME GRAT H, ROBE                            |                            |  |   |  |
| STREET ADDRESS                                   | 2008 NW 21ST ST   |   | 1.3 STREET ADDRESS  |  | less ipr,                  |  |   |  |
| CITY-ST-ZIP                                      | BOYNTON BEACH FL 33436  | Tel   | 1.4 CITY - ST - ZIP   | LA-KE WORTH, 1                             | 71.35167                   |  | ,                                       |  |
| TITLE  | VPD   | <b>□</b> DELETE                               | 2.1 TITLE   | VP-Q                                       |                            |  | Addition                                |  |
| NAME   | MCGRATH, ROBERT   |   | 2.2 NAME  | BECREP STEP                                | TEMS, K.                   |  |   |  |
| STREET ADDRESS                                   | 8438 BLUE BYPRESS DR  |   | 29 STREET ADDRESS   | 1 * * * * * * * * * * * * * * * * * * *    |                            | = 13-110                                     |   |  |
| CITY-ST-ZIP                                      | LAKE WORTH FL 33467   | TE DELETE                                     | 2 # CITY-ST-ZIP   | LANTAUR, 12.33                             | 462                        | Change Change                                | 1 |  |
| TITLE  | D<br>ONICED CADI  | (F) DETELE                                    | 3.1 TITLE   | OLSON, THEODO                              | N 60 EE                    | (32) Change                                  | Addition                                |  |
| NAME<br>ATTECT LABORES                           | Gaiser, Carl<br>2016 S Federal Hwy #3071  | E   | 3.2 NAME  | , -  |                            |  | ļ                                       |  |
| STREET ADDRESS                                   | BOYNTON BEACH FL 33435  | <u>5</u>                                      | 3.3 STREET ADDRESS  | 1 - 1                                      |                            |  |   |  |
| CITY-ST-ZIP<br>TITLE                             | T DO INTON DEAON PE 33433   | DELETE  | 3.4. CITY-ST-ZIP<br>4.1 TITLE                               | LAKE WORTH,                                | 11, 33463                  | Change                                       | Addition                                |  |
| NAME   | AHO, JOHN   |   | 4. 2 NAME   |  |                            | Unungo Co                                    | 1,00,000                                |  |
| STREET ADDRESS                                   | 815 RIDGE RD #7   |   | 4.3 STREET ADDRESS  |  |                            |  |   |  |
| CITY-ST-ZIP                                      | LANTANA FL 33462  |   | 4.4 CITY-ST-ZIP   | <b>'</b>                                   |                            |  |   |  |
| TITLE  | E WILLIAM I P G G G G   | DELETE  | 5.1 TITLE   |  |                            | Change                                       | Addition                                |  |
| NAME   |   |   | 5.2 NAME  |  |                            | - •  |   |  |
| STREET ADDRESS                                   |   |   | 5.3 STREET ADDRESS  | ;  |                            |  |   |  |
| CITY-ST-ZIP                                      |   |   | 5.4 CITY - ST - ZIP   |  |                            |  |   |  |
| TITLE  |   | DELETE  | 6.1 TITLE   | <del> </del>                               |                            | Change                                       | Addition                                |  |
| NAME   |   |   | 6.2 NAME  |  |                            | -  | İ                                       |  |
| STREET ADDRESS                                   |   |   | 6.3 STREET ADDRESS  | ;  |                            |  |   |  |
| CITY-ST-2IP                                      |   |   | 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 if changed, or on an attachment with an address.