


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 29, 2004 8:00 am**  
**Secretary of State**

03-29-2004 90088 036 \*\*\*\*61.25

<b>DOCUMENT # N95000000967</b> 1. Entity Name <b>WINTER GARDEN LODGE NUMBER 2165 OF THE BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF</b>					
Principal Place of Business 700 S. 9TH ST. WINTER GARDEN FL 34787		Mailing Address 700 S. 9TH ST. WINTER GARDEN FL 34787			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>WARREN, PEGGY 516 GRAND ROYAL CR WINTER GARDEN FL 34787</b>				7. Name and Address of New Registered Agent Name <b>RUSS PELAQVIN</b> Street Address (P.O. Box Number is Not Acceptable) <b>2022 OPERC DRIVE</b> City <b>WINDERMERE</b> FL Zip Code <b>34786</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u><i>Russ Pelagvin</i></u> <b>RUSS PELAQVIN</b> <u>MAR 15, 2004</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LABEREE, GEORGE <input checked="" type="checkbox"/> Delete 51 ORANGE TREE CIR WINTER GARDEN FL 34787		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BOB BROWNING 1214 MEADOWFINCH DRIVE WINTER GARDEN, FL 34787	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BOWDEN, WILLIAM PO BOX 770861 WINTER GARDEN FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BILL SCARBROUGH 982 MORNING DOVE DRIVE WINTER GARDEN, FL 34787	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete ARMSTRONG, ALICE 809 FLEWELLING OCOE FL 34761		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition CHARLIE CRANE 5703 WESTVIEW DRIVE ORLANDO, FL 32810	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete FITZGERALD, MIKE 567 GARDEN HEIGHTS DR. WINTER GARDEN FL 34787		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition LOU MARTIN P.O. BOX 683 OCOE, FL 34761	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete SMITH, STAN 320 CINNAMON BARK LANE ORLANDO FL 32855		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition SHARON VALLANCE 1301 CENTER STREET OCOE, FL 34761	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete HIEMENZ, RICHARD 10701 GARDENWOOD RD. ORLANDO FL 32837		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DAVE SORENSON 6628 LAGOON STREET WINDERMERE, FL 34786	
12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Stan Smith</i></u> <b>STAN SMITH</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>Mar 15, 2004</u> <small>Date Daytime Phone #</small>		