2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001996

FILED Apr 26, 2006 Secretary of State

Entity Name: CLERMONT-GROVELAND ELKS LODGE, #1848, INC.

Current Principal Place of Business: New Principal Place of Business:

705 WEST MINNEOLA AVENUE CLERMONT, FL 34712

Current Mailing Address: New Mailing Address:

705 WEST MINNEOLA AVENUE CLERMONT, FL 34712

FEI Number: 59-0699166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLICK, ANGELA D 614 LINDEN ST CLERMONT, FL 34711 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete WINTERS, DAVID M FLICK, ANGELA D Name: Name: 15804-20 HWY 50 Address: 614 LINDEN ST Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: Title: (X) Change () Addition () Delete

FLICK, ANGELA D Name: WINTERS, DAVID M Name: Address: 614 LINDEN ST Address: 15804-20 HWY 50 City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: () Change () Addition

BURDEN, ALLEN M Name: Name: 16715 RIDGEWOOD AVE. Address: Address: City-St-Zip: MONTVERDE, FL City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: NEUMAN, STEVE Name: Address: 12412 LAKE VALLEY DR Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

GRAY, DENIS IRBY, GLENN A Name: Name: 7342 GROVELAND FARMS RD 614 LINDEN ST Address: Address: City-St-Zip: GROVELAND, FL 34736 City-St-Zip: CLERMONT, FL 34711

Title: () Delete Title: (X) Change () Addition

EYERLY, ROBERT D HORD, DONALD Name: Name: Address: 8009 GROVEMONT EST RD Address: 660 HOOK ST, LOT 26 GROVELAND, FL 34736 CLERMONT, FL 34711 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGELA D. FLICK MRS. 04/26/2006