2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 03, 2002 8:00 am DOCUMENT # N9800001224 Secretary of State 1. Entity Name FREDERICK KELLY ELKS LODGE #1270 INC. 02-03-2002 90019 034 ****61.25 Mailing Address Principal Place of Business POST OFFICE BOX 91 510 SUMMIT ROAD **BROOKSVILLE FL 34601** BROOKSVILLE FL 34601 Mailing Address 2. Principal Place of Business King blud DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number 59-2996777 W DZI OO' Not Applicable rooksuille \$8.75 Additional Country USA 5. Certificate of Status Desired Fee Required lernando Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent O. Box Number is Not Acceptable) WRIGHT, HENRY C 219 EAST EARLY STREET BROOKSVILLE FL 34601 City 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. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE ☐ Delete TITLE **BURNETT, CHARLES** NAME NAME STREET ADDRESS 860 SCHOOL ST STREET ADDRESS CITY-ST-ZIP BROOKSVILLE FL 34601 CITY-ST-ZIF secretar; ☐ Addition ☐ Delete TITLE TITLE PAUL BOS' HAMILTON, LORENZO 071 Book Raton St. NAME NAME STREET ADDRESS 411 WALKER ST STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34609 CITY-ST-ZIP ☐ Change ☐ Addition Treasure v Delete TITLE TITLE COBB. RUDOLPH NAME NAME 21377 TRUBY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BROOKSVILLE FL 34601** CITY-ST-7IP ding Knight Addition Delete TITLE TITLE WRIGHT, HENRY C NAME NAME STREET ADDRESS 219 E EARLY ST STREET ADDRESS prosksville CITY-ST-ZIP Fl- 34601 CITY-ST-ZIP **BROOKSVILLE FL 34601** Exalted Ruler ☐ Addition К Delete TITLE TITLE Joseph Maner MANER, JOSEPH NAME NAME 910 Josephine 8t-STREET ADDRESS 910 JOSEPHINE ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL 34601** Addition TITLE ☐ Delete TITLE WILLIAM, JOHNNY NAME NAME STREET ADDRESS 745 BAILEY ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BROOKSVILLE FL 34601** 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