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Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **701196** (8)

1. Corporation Name

HOLLYWOOD LODGE NO 1732, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA

Principal Place of Business

Mailing Address

**EFFECTIVE ORDER OF ELKS OF TH U.S. OF AMERICA
1308 S FEDERAL HWY
HOLLYWOOD FL 33020**

**EFFECTIVE ORDER OF ELKS OF TH U.S. OF AMERICA
1308 S FEDERAL HWY
HOLLYWOOD FL 33020-6340**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/14/1960		3a. Date of Last Report 04/04/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-0574520		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RODRIGUES, EUGENE
2324 N 37TH AVE
HOLLYWOOD FL 33020**

81 Name **JAMES KENNEDY**
82 Street Address (P.O. Box Number is Not Acceptable)
83 **1734 FLETCHER ST #2**
84 City **HOLLYWOOD** **FL** 85 Zip Code **33020**

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 *James Kennedy* **JAMES KENNEDY** DATE **4-8-1997**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TENORE, JOSEPH	1.2 NAME	EMILE F MEUNIER
STREET ADDRESS	4100 N 58 AVE	1.3 STREET ADDRESS	19400 N E 22 AVE
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	AVENTURA FLA 33180
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, FELIX	2.2 NAME	JULES SERIANI
STREET ADDRESS	2100 N 31ST RD	2.3 STREET ADDRESS	1420 SHERIDAN ST
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	HOLLYWOOD FLA 33020
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALO, ORSOLINI	3.2 NAME	TONY GUGLIEAMI
STREET ADDRESS	3300 N STATE RD 7	3.3 STREET ADDRESS	2200 PARK LANE
CITY-ST-ZIP	HOLLYWOOD FL	3.4 CITY-ST-ZIP	HOLLYWOOD FLA 33021
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHREIER, RICHARD	4.2 NAME	JOSEPH VICKERS
STREET ADDRESS	1642 NE 97 AVE	4.3 STREET ADDRESS	5100 WASHINGTON ST
CITY-ST-ZIP	CORAL SPRINGS FL	4.4 CITY-ST-ZIP	HOLLYWOOD FLA 33020
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VICKERS, JOSEPH	5.2 NAME	WALTER HUGHES
STREET ADDRESS	5100 WASHINGTON ST BLDG S 407	5.3 STREET ADDRESS	350 174th ST
CITY-ST-ZIP	HOLLYWOOD FL	5.4 CITY-ST-ZIP	N MIAMI BEACH FLA 33160
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGHES, WALTER	6.2 NAME	JAMES KENNEDY
STREET ADDRESS	350-174TH ST	6.3 STREET ADDRESS	1734 FLETCHER ST # 2
CITY-ST-ZIP	N MIAMI BEACH FL	6.4 CITY-ST-ZIP	HOLLYWOOD FLA 33020

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.

SIGNATURE

(Signature) **JAMES KENNEDY** 4/8/97 954-911-9950

CR2E037 (9/96)