

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726955

**Entity Name:** FLORIDA STATE ELKS ASSOCIATION, INC.

**Current Principal Place of Business:**

24175 SE HWY 450  
UMATILLA, FL 32784

**Current Mailing Address:**

PO BOX 49  
UMATILLA, FL 32784 US

**FEI Number:** 59-0647830

**Certificate of Status Desired:** No

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

SEIBERT, CARL T  
24175 SE HWY 450  
UMATILLA, FL 32784 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name SEIBERT, CARL T  
Address 24175 SE HWY 450  
City-State-Zip: UMATILLA FL 32784

Title T  
Name BRYANT, JOSEPH B  
Address 302 SPARROW AVENUE  
City-State-Zip: SEBRING FL 33872

Title D  
Name LAKE, DAVID B  
Address P.O. BOX 50369  
City-State-Zip: FORT MYERS FL 33994-0369

Title D  
Name COMO, VINCENT P  
Address 2042 NW 104TH AVENUE  
City-State-Zip: CORAL SPRINGS FL 33071

Title PD  
Name BURNS, BRIAN PD  
Address 3662 NW C.R. 661  
City-State-Zip: ARCADIA FL 34266

*I hereby 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 all other like empowered.*

**SIGNATURE:** CARL T SEIBERT

**SECRETARY**

**04/16/2014**

Electronic Signature of Signing Officer/Director Detail

Date