

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 24, 2017
Secretary of State
CC8011562621

Entity Name: ORLANDO LODGE NO. 1079, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INC.

Current Principal Place of Business:

12 NORTH PRIMROSE DR
ORLANDO, FL 32803

Current Mailing Address:

12 NORTH PRIMROSE DR
ORLANDO, FL 32803 US

FEI Number: 59-0161109

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BAUM, JOHN V
12 NORTH PRIMROSE DR
ORLANDO, FL 32803 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: JOHN V. BAUM

03/24/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ST. LAWRENCE, JOHN
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name RICHARDS, JODY
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title SECRETARY
Name AKIN, VIRGINIA KEHOE
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title PRESIDENT
Name BAUM, JOHN V
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title VP
Name BEMOS, RALPH W
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name FINLAY, PHILIP M
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title TREASURER
Name BOUCHER, RITA E
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name SIMON, DONALD
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

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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: JOHN V. BAUM

PRESIDENT

03/24/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LOCKWOOD, LARRY
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title VP
Name DAVIES, PATRICIA
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title VP
Name SCMITT, DALE
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803