

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000004120

FILED
Apr 30, 2013
Secretary of State
CC5380056720

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

FEI Number: 59-0161109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOTES, CARL D
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name ERWIN, GEORGE
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title D
Name SCHMITT, GEORGE D.
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title D
Name HAROLD, TRUDY
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title D
Name HAROLD, TRUDY
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title D
Name BRISTOL, ROGER
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title D
Name FELDMEYER, WILLIAM
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name WILLIAM, BIBB M.
Address 12 NORTH PRIMROSE DR
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name SCHIMMELPFENNIG, ROBERT
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: GEORGE ERWIN

PRESIDENT

04/30/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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