

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000010697

**Entity Name:** DELTA LODGE #519, INC

**Current Principal Place of Business:**

159 SW 1ST TERR  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

P.O. BOX 522  
DEERFIELD BEACH, FL 33441 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SCOTT, TERRY  
624 NW 2ND WAY  
DEERFIELD BEACH, FL 33441 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            PRES  
Name            LANE, CALVIN D  
Address        159 SW 1ST TERR  
City-State-Zip: DEERFIELD BEACH FL 33441

Title            VP  
Name            BOSKET, JEFF  
Address        159 SW 1ST TERR  
City-State-Zip: DEERFIELD BEACH FL 33441

Title            2 VP  
Name            BOSTON, DEVON  
Address        159 SW 1ST TERR  
City-State-Zip: DEERFIELD BEACH FL 33441

Title            SEC  
Name            SCOTT, TERRY D  
Address        624 NW 2ND WAY  
City-State-Zip: DEERFIELD BEACH FL 33441

Title            TREA  
Name            MORELAND, JOHN  
Address        124 NW 15TH ST  
City-State-Zip: POMPANO BEACH FL 33060

Title            TRUS  
Name            MOBLEY, WALTER  
Address        660 NW 17TH ST  
City-State-Zip: POMPANO BEACH FL 33060

*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:** TERRY D. SCOTT

**SECRETARY**

**05/01/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date