Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43184

Entity Name: FORT MYERS LODGE, NO. 1288 BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA

Current Principal Place of Business:

2180 WEST FIRST STREET UNIT 320 FT MYERS, FL 33901

Current Mailing Address:

2180 WEST FIRST STREET UNIT 320 FORT MYERS, FL 33901 US

FEI Number: 59-0232981

Name and Address of Current Registered Agent:

SAUNDERS, GAYLE SECRETARY 2180 WEST FIRST STREET UNIT 320 FT MYERS, FL 33901 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	E: GAYLE SAUNDERS			01/05/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	EXALTED RULER	Title	SECRETARY	
Name	SPENCER, ROGER	Name	SAUNDERS, GAYLE	
Address	2180 WEST FIRST STREET UNIT 320	Address	2180 WEST FIRST STREET UNIT 320	
City-State-Zip:	FT MYERS FL 33901	City-State-Zip:	FORT MYERS FL 33901	
Title	CHAIRMAN OF BOARD	Title	TRUSTEE	
Name	SPENCER, ROGER	Name	MCCLEAVE, MELBA PER	
Address	2180 WEST FIRST STREET UNIT 320	Address	2180 WEST FIRST STREET UNIT 320	
City-State-Zip:	FT MYERS FL 33901	City-State-Zip:	FT MYERS FL 33901	
Title	LODGE ADVISOR	Title	TREASURER	
Name	GERSBACH, PHILIP PDD	Name	ARNOLD, DONNA PDD	
Address	2180 WEST FIRST STREET UNIT 320	Address	2180 WEST FIRST STREET UNIT 320	
City-State-Zip:	FT MYERS FL 33901	City-State-Zip:	FT MYERS FL 33901	
Title	TRUSTEE	Title	LOYAL KNIGHT	
Name	MASCARI, FRANK	Name	CONLEY, RICHARD PER	
Address	2180 WEST FIRST STREET UNIT 320	Address	2180 WEST FIRST STREET UNIT 320	
City-State-Zip:	FT MYERS FL 33901	City-State-Zip:	FT MYERS FL 33901	

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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: GAYLE SAUNDERS

FILED Jan 05, 2021 Secretary of State 0183627112CC

Certificate of Status Desired: Yes

01/05/2021

Officer/Director Detail Continued :

Title	ESQUIRE
Name	LAKE, DAVID PSP
Address	2180 WEST FIRST STREET UNIT 320
City-State-Zip:	FT MYERS FL 33901