

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

DOCUMENT# N48531

**FILED**  
**Mar 02, 2015**  
**Secretary of State**  
**CC1661289820****Entity Name:** DELRAY BEACH LODGE, NO. 1770, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INCORPORATED**Current Principal Place of Business:**265 NE 4TH AVENUE  
DELRAY BEACH, FL 33483**Current Mailing Address:**265 NE 4TH AVENUE  
DELRAY BEACH, FL 33483 US**FEI Number: 59-0669282****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**EATON, CAROL  
265 NE 4TH AVENUE  
DELRAY BEACH, FL 33483 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:** CAROL EATON

03/02/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TRUSTEE
Name	GIORDANO, KATHY
Address	265 NE 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	TRUSTEE
Name	EATON, JAMES J
Address	265 NE 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	TREASURER
Name	EATON, CAROL F
Address	265 NE 4TH AVE
City-State-Zip:	DELRAY BEACH FL 33483

Title	SECRETARY
Name	LYDON, PATTI
Address	265 NE 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	PRESIDENT
Name	RODRIGUEZ, MICHAEL
Address	265 NE 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

Title	TRUSTEE
Name	BORSOS, MICHAEL
Address	265 NE 4TH AVENUE
City-State-Zip:	DELRAY BEACH FL 33483

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:** CAROL EATON**TREASURER**

03/02/2015

Electronic Signature of Signing Officer/Director Detail

Date