

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004479

**FILED**  
**May 14, 2021**  
**Secretary of State**  
**6842988952CC**

**Entity Name:** FT. PIERCE LODGE, 1520, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INCORPORATED

**Current Principal Place of Business:**

608 SOUTH 5TH STREET  
FT PIERCE, FL 34950

**Current Mailing Address:**

P.O. BOX 3749  
FT. PIERCE, FL 34948-3749 US

**FEI Number: 59-0250528**

**Certificate of Status Desired: Yes**

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

FREELING, ROBERTA J  
608 SOUTH 5TH STREET  
FT PIERCE, FL 34950 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: ROBERTA J FREELING**

**05/14/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN, BOD  
Name AIEVOLI, DAVID A.  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title TRUSTEE  
Name FIEBELKORN, ROBERT  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title TRUSTEE  
Name SMITH, RICHARD  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title LOYAL KNIGHT  
Name FIEBELKORN, DANIEL  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title EXALTED RULER  
Name SWAYNGIM, PATRICIA A.  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title LEADING KNIGHT  
Name FOSTER, BETTY  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title TREASURER  
Name FREELING, ROBERTA J  
Address 608 SOUTH 5TH STREET  
City-State-Zip: FT PIERCE FL 34950

Title TRUSTEE  
Name SWAYNGIM, J. MICHAEL  
Address 608 S. 5TH STREET  
City-State-Zip: FORT PIERCE FL 34948

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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: ROBERTA FREELING**

**TREASURER**

**05/14/2021**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name BORROR, SCOTT  
Address 608 S. 5TH STREET  
City-State-Zip: FORT PIERCE FL 34948

Title LECTURING KNIGHT  
Name SMITH, ANN  
Address 608 S. 5TH STREET  
City-State-Zip: FORT PIERCE FL 34948