## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## FLORIDA DEPARTMENT OF STATE APPLICATION Jim Smith **FOR** Secretary of State REINSTATEM **DIVISION OF CORPORATIONS**

**DOCUMENT #** 

701002

1. Cc.poration Name

## TITUSVILLE LODGE NO. 2113, BENEVOLENT AND PROTEC TIVE ORDER OF ELKS OF THE UNITED STATES OF AMERI

Principal Place of Business

2955 COLUBIA BLVD. PO BOX 2137

TITUSVILLE FL 32781-2137

Mailing Address

2955 COLUBIA BLVD. PO BOX 2137

**TITUSVILLE FL 32781-2137** 

FILED

02 MOV -8 AM 9: 25

SECRETAMY OF STATE TALLAMASSEE, FLORIDA



il above addresses are incorrect in any way, line through incorrect information and enter correction below.													
2. New Pri	ing Office Address, If Applicable				4. Date Incorporated or Qualified To Do Business in Florida 05/23/1974								
Suite, Apt. #, etc. Suite, Apt. #				, etc.			$\neg$		· · · · · · · · · · · · · · · · · · ·				
City & State City & State							5. FEI Number	59-0919035			Applied For		
Only & Size			Oity & State	•			- [					Not Applicable	
Žip	Country		Žip	Żip		buntry		6. CERTIFICATE	OF STATUS DESIRED	\$8.75 for	Additional Certification	onal Fee required licate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)													
Title(s)	Name of Officers and/or Directors			3	reet Address of Each fficer and/or Director			City / State / Zip					
D —	HARNISH,	2865 MORNING DOVE-WAY				TITUSVILLE FL 327	<u></u>						
D	Gary Nickerson			1726 N. Singleto			or					32796	
<del>-D</del>	HAUSEN,	6031 BARNA AVENUE					TITUSVILLE FL 32780						
D	Susan Lugar				· =								
		1704 Country Club Dr.				Dr.	Titusvill		FL.	32780			
PD	PARKS, JII	9305 BEST AVENUE					TITUSVILLE FL-327						
D	rrea	Gallagher		1735	Va:	lley For	ge	2	Titusvil1	e, :	FL.	32796	
D	Jeann	4510 Olympic Dr.				Cocoa, Fl. 32927							
D	Jack	512 Oak Cove Rd.					Titusvil1	e, ]	FL.	32780			
	8. Name	a and Address of Current I	Ponistered Ano	nt	<del></del>	<del> </del>							
8. Name and Address of Current Registered Agent						Name	9. Name and Address of New Registered Agent						
WEBER, RICHARD D.					Clifford J. Su				tz -			}	
5070 CARRICK ROAD							O. Box Number is Not Acceptable)						
PORT ST JOHN FL 32927				3445 Heron La			on Lane	ne j					
, o o. oom ( E 0202)				Suite, Apt. #, Etc.					7				
						City				State 2	Zin Cod	le	
						Titusv		FLİ	327				
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.													
Signature of Registered A	. V (	WARA (		1-		IRED			Date 11-4			2	

this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

11. I certify that I am an officer or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing

PED OR PONTED NAME OF SIGNING OFFICER OR DIRECTOR

SEGISTERED AGENT MUST SIGN

11-4-2002 321-383.1068



BENEVOLENT AND PROTECTIVE ORDER OF ELKS

P.O. Box 2137

Titusville, Florida 32781-2137

November 2, 2002

Dear Sir/Madam

The previous corporation renewal form was sent in on time but filled out incorrectly. The enclosed form is corrected and signed. Please waive any penalty fees.

Thank you,

Clifford J. Sultz, Registered Agent