## 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 703611** 

FILED Dec 19, 2011 Secretary of State

Entity Name: JACKSONVILLE LODGE NO. 221, INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF

THE UNITED STATES OF AMERICA

Current Principal Place of Business: New Principal Place of Business:

1855 WEST ROAD

JACKSONVILLE, FL 32216 US

Current Mailing Address: New Mailing Address:

P O BOX 16192 1855 WEST ROAD

JACKSONVILLE, FL 32245 US JACKSONVILLE, FL 32216 US

FEI Number: 59-0974998 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AMBROSE, KEVIN J SECRETA WILSON, SCOTT A
253 VINTAGE OAKS CIRCLE 2436 PARENTAL HOME ROAD

ST AUGUSTINE, FL 32092 US JACKSONVILLE, FL 32216 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: SCOTT A WILSON 12/19/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

Name: WILSON, SCOTT A

Address: 2436 PARENTAL HOME ROAD City-St-Zip: JACKSONVILLE, FL 32216 US

Title: SEC

 Name:
 LEE, ROBERT T

 Address:
 3339 CLAREMONT ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32207 US

Title: VP

Name: BRYANT, JIM JR.

Address: 3418 EMERALD ISLE CIRCLE WEST City-St-Zip: JACKSONVILLE, FL 32216 US

Title: 2VP

Name: BRYANT, BETSY

Address: 3418 EMERALD ISLE CIRCLE WEST City-St-Zip: JACKSONVILLE, FL 32216 US

Title: 3VP

Name: POPE, DAWN

Address: 5800 BEACH BLVD SUITE 203-262 City-St-Zip: JACKSONVILLE, FL 32207 US

Title: TREA

Name: JOHNS, THOMAS

Address: 6714 PROVOST ROAD NORTH City-St-Zip: JACKSONVILLE, FL 32216 US

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: SCOTT A WILSON PRES 12/19/2011