

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 703987 (8)

1. Corporation Name

PINELLAS PARK LODGE NO 2217, INC. BENEVOLENT AND  
PROTECTIVE ORDER OF ELKS OF THE UNITED STATES O



Principal Place of Business

7550 40TH STREET NORTH  
PINELLAS PARK FL 34665-3605

Mailing Address

7550 40TH STREET NORTH  
PINELLAS PARK FL 34665-3605

3. Date Incorporated or Qualified  
01/24/1972

3a. Date of Last Report  
05/11/1995

2. Principal Place of Business

21 7550 40 th Street n

Suite, Apt. #, etc.

22

City & State

23 Pinellas Park Fl

Zip

24 34665

Country

25 Pinellas

2a. Mailing Address

26 7550 40 th Street n

Suite, Apt. #, etc.

27

City & State

28 Pinellas Park Fl

Zip

29 34665

Country

30 Pinellas

4. FEI Number  
59-1148592

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

HOLMAN, ROBERT W.  
4930 PARK BOULEVARD  
PINELLAS PARK FL 33565

10. Name and Address of New Registered Agent

81 Name JOSEPH DURAN

82 Street Address (P.O. Box Number is Not Acceptable)

2647 55 th Street N

83

84 City St Petersburg

FL

85 Zip Code  
33710

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Joseph Duran, Exalted Ruler

5/9/96  
DATE

(Signature typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE SD ☐ DELETE

NAME MARXEN, ROGER  
STREET ADDRESS 4500 73RD AVE. N.  
CITY-ST-ZIP PINELLAS PARK FL

TITLE PD ☒ DELETE

NAME MORRA, JOHN  
STREET ADDRESS 6582 4TH AVENUE NORTH  
CITY-ST-ZIP ST PETE FL

TITLE TD ☐ DELETE

NAME BYRCE, ROBERT  
STREET ADDRESS 5003 76TH ST N  
CITY-ST-ZIP ST PETE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD  
JOSEPH DURAN  
2647 55 th Street n  
St Petersburg Fl 33710

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roger A Marxen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/96  
Date

544-2325  
Daytime Phone #

CR2E037 (12/95)