

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90018 004 ****61.25

DOCUMENT # 703987

1. Entity Name

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



Principal Place of Business

**7550 40TH STREET NORTH
PINELLAS PARK FL 33781
US**

Mailing Address

**7550 40TH STREET NORTH
PINELLAS PARK FL 33781
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1148592

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, KAREN
10142 44TH WAY N.
PINELLAS PARK FL 33782**

Name

ANN P. WILLIAMS

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

4596 35th TERRACE N.

City

ST. PETERSBURG

FL

Zip Code

33713

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **TD** ☐ Delete
NAME **WHEELER, PAT**
STREET ADDRESS **8712 41ST STREET N**
CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE **SD** ☐ Delete
NAME **VESS, JOHN**
STREET ADDRESS **3477 98TH TERRACE N.**
CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE **PD** ☒ Delete
NAME **SMITH, KAREN**
STREET ADDRESS **10142 44TH WAY N**
CITY-ST-ZIP **PINELLAS PARK FL 33782**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☒ Change ☐ Addition
NAME **VOSS, JOHN**
STREET ADDRESS **3477 98th TERRACE N**
CITY-ST-ZIP **PINELLAS PARK, FL 33782**

TITLE **PD** ☐ Change ☒ Addition
NAME **WILLIAMS, ANN P**
STREET ADDRESS **4596 35th TERRACE N**
CITY-ST-ZIP **ST. PETERSBURG, FL 33713**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter A. W. Lolo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31-3-06

727-544-2325

Date

Daytime Phone #