2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State
04-22-2002 90307 017 ****61.25

DOCUMENT # 708980

1. Entity Name

HOLIDAY ISLES LODGE NO.1912 INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES O

Principal Place of Business	Mailing Address
VOLENT AND PROTECTIVE ORDER OF ELKS OF 14111 E. PARSLEY DRIVE. BOX 8066 MADEIRA BEACH FL 33708	VOLENT AND PROTECTIVE ORDER OF ELKS OF 14111 E. PARSLEY DRIVE. BOX 8066 MADEIRA BEACH FL 33708

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
CORRECT	CORRECT
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2210992 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KONTZ, RICHARD
10365 PARADISE BLVD #24
TREASURE ISLAND FL 33706

7. Name and Address of New Registered Agent

Name: DANIEL K. DONAT
Street Address (P.O. Box Number is Not Acceptable): 570 LILLIAN DRIVE
City: MADEIRA BEACH FL Zip Code: 33708

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.

SIGNATURE: Daniel K Donat DATE: 4-12-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMITH, LARRY 329 E. MADEIRA AVE. MADEIRA FL 33708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Choronenko, Iwan 1391 50th Ave. N.E. St. Petersburg, FL 33703	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHORONENKO, EWAN 1391 50TH AVE N.E. SAINT PETERSBURG FL 33703	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Robert G. Hall 9490 Harbor Greens Way Seminole, FL 34646	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HALL, ROBERT 9490 HARBOR GREENS WAY SEMINOLE FL 34646	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Audrey E. Morgan 9514 Tara Cay Ct. Seminole, FL 33776	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MORGAN, AUDREY 9514 TARA CAY CT SEMINOLE FL 33776	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Donna Kierstead 8631 118th Way N. Seminole, FL 33772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOONTZ, RICHARD 10365 PARADISE BLVD. #24 TREASURE ISLAND FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/S Dan Donat 570 Lillian Dr. Madeira Beach, FL 33708	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GUILFOYLE, WILLIAM 10173 ASHLEY DR SEMINOLE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Carl R. VanHart 175 116th Ave. Apt. 103 Treasure Island, FL 33706	☒ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED Daniel K. Donat 4-12-02 (727) 393-7545