2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708980

FILED Apr 30, 2008 Secretary of State

Entity Name: HOLIDAY ISLES LODGE NO.1912 INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF

THE UNITED STATES OF AMERICA

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

VOLENT AND PROTECTIVE ORDER OF ELKS OF 14111 E. PARSLEY DRIVE, BOX 8066

MADEIRA BEACH, FL 33708

Current Mailing Address: New Mailing Address:

VOLENT AND PROTECTIVE ORDER OF ELKS OF 14111 E. PARSLEY DRIVE, BOX 8066 MADEIRA BEACH, FL 33708

FEI Number: 59-2210992 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:

MARKS, HARRIS KIERSTEAD, DONNA 14183 E PARSLEY DR 14111 E PARSLEY DR

SAINT PETERSBURG, FL 33708 US SAINT PETERSBURG, FL 33708 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: DONNA KIERSTEAD 04/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: () Change() Addition

 Name:
 KRAUSE, SANDRA
 Name:

 Address:
 3947 35TH WAY S. #129
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33711
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 VOIGT, BRAD
 Name:
 WILLIAMS, ANN

 Address:
 7100 SKYWAY LANE # 306
 Address:
 14111 E PARSLEY DR

 City-St-Zip:
 ST. PETERSBURG, FL 33711
 City-St-Zip:
 MADEIRA BEACH, FL 33708

Title: SD () Delete Title: SD (X) Change () Addition

Name:MARKS, HARRISName:KIERSTEAD, DONNAAddress:14183 E. PARSLEY DRAddress:14111 E PARSLEY DRCity-St-Zip:MADEIRA BEACH, FL 33708City-St-Zip:MADEIRA BEACH, FL 33708

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONNA KIERSTEAD S 04/30/2008