FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **711230** **(3)**

1. Corporation Name

JACKSONVILLE BEACH LODGE NO. 1901 INC., BENEVOLE NT AND PROTECTIVE ORDER OF ELKS OF THE UNITED ST

Principal Place of Business	Mailing Address
P. O. BOX 50972 JACKSONVILLE BEACH FL 32240 US	P. O. BOX 50972 JACKSONVILLE BEACH FL 32240-0972 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/20/1966
3a. Date of Last Report: 04/20/1994
4. FEI Number: 59-0711236 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 628 1ST AV NORTH	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: JACKSONVILLE BCH FL	28 City & State
24 Zip: 32250 25 Country: DUVAL	29 Zip 30 Country

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

IGO, JERRY
628 FIRST AVE N
JACKSONVILLE BEACH FL 32250

10. Name and Address of New Registered Agent

81 Name: MEREDYTH J. HAYNES, JR.
82 Street Address (P.O. Box Number is Not Acceptable): 2091 SALLAS LANE
83
84 City: ATLANTIC BEACH **FL** 85 Zip Code: 32233

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: MEREDYTH J. HAYNES, JR. DATE: APRIL 24, 1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	XX Change ☐ Addition
NAME	IGO, JERRY	1.2 NAME	MEREDYTH J. HAYNES, JR.	
STREET ADDRESS	628 FIRST AVE N	1.3 STREET ADDRESS	2091 SALLAS LANE	
CITY-ST-ZIP	JACKSONVILLE BEACH FL	1.4 CITY-ST-ZIP	ATLANTIC BEACH FL 32233-2721	
TITLE	VD	2.1 TITLE	VD	XX Change ☐ Addition
NAME	READ, JAMES GORDON	2.2 NAME	JAMES F. SMITH	
STREET ADDRESS	1533 HOPKINS CREEK LN	2.3 STREET ADDRESS	1230 6TH AV NORTH	
CITY-ST-ZIP	NEPTUNE BEACH FL	2.4 CITY-ST-ZIP	JACKSONVILLE BCH FL 32250-0000	
TITLE	D	3.1 TITLE	D	XX Change ☐ Addition
NAME	SWARTZENDRUBER, KEN	3.2 NAME	GERALD CASTILLO	
STREET ADDRESS	705 13TH AVE N	3.3 STREET ADDRESS	8 MEIR ROAD	
CITY-ST-ZIP	JACKSONVILLE BEACH FL	3.4 CITY-ST-ZIP	PONTE VEDRA BCH FL 32082	
TITLE	DT	4.1 TITLE	TD	XX Change ☐ Addition
NAME	WILSON, JR. W	4.2 NAME	JOHN G. MEDLOCK	
STREET ADDRESS	422 2ND AVE S	4.3 STREET ADDRESS	2302 WINDJAMMER LANE	
CITY-ST-ZIP	JACKSONVILLE BEACH FL	4.4 CITY-ST-ZIP	JACKSONVILLLE FL 32224-1127	
TITLE	DT	5.1 TITLE	TD	XX Change ☐ Addition
NAME	SMITH, GEOERGE C	5.2 NAME	JAMES GORDON READ	
STREET ADDRESS	607 16TH AVE N	5.3 STREET ADDRESS	1533 HOPKINS CREEK LANE	
CITY-ST-ZIP	JACKSONVILLE BEACH FL	5.4 CITY-ST-ZIP	NEPTUNE BEACH FL 32266-3203	
TITLE	DT	6.1 TITLE		☐ Change ☐ Addition
NAME	CROW, ROBERT J.	6.2 NAME		
STREET ADDRESS	511 BOWLES ST	6.3 STREET ADDRESS		
CITY-ST-ZIP	NEPTUNE BEACH FL	6.4 CITY-ST-ZIP		

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)(i), 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 above, or on an attachment with an address.

SIGNATURE: MEREDYTH J. HAYNES, JR. APRIL 24, 1995 (904)-246-3119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #