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Apr 24 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 711230 (3)

1. Corporation Name

JACKSONVILLE BEACH LODGE NO. 1901 INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES

Principal Place of Business

628 1ST AVE. NORTH
JACKSONVILLE BEACH FL 32250
US

Mailing Address

P. O. BOX 50972
JACKSONVILLE BEACH FL 32240-0972
US

3. Date Incorporated or Qualified
07/20/1966

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-0711236

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

SMITH JAMES F.
1230 6TH AVE. NO.
JACKSONVILLE BCH. FL 32250

10. Name and Address of New Registered Agent

81 Name

Gerald C. Castillo

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

8 Meir Road

83

84 City

Ponte Vedra Beach

FL

85 Zip Code

32082

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: *Gerald C. Castillo*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

04/17/97
DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	SMITH, JAMES F.	
STREET ADDRESS	1230 6TH AVE. NO.	
CITY-ST-ZIP	JACKSONVILLE BCH. FL 32250	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SMITH, WILLIAM E.	
STREET ADDRESS	926 6TH AVE. N.	
CITY-ST-ZIP	JACKSONVILLE BCH. FL 32250	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	CASTILLO, GERALD	
STREET ADDRESS	8 MEIR RD	
CITY-ST-ZIP	POINTE VEDRA BCH FL 32082	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TONDREAULT, MARK	
STREET ADDRESS	20 MACKERAL ST.	
CITY-ST-ZIP	POINTE VEDRA BCH. FL 32082	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	SMITH, GEORGE C	
STREET ADDRESS	607 16TH AVE N	
CITY-ST-ZIP	JACKSONVILLE BEACH FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	CROW, ROBERT J.	
STREET ADDRESS	511 BOWLES ST	
CITY-ST-ZIP	NEPTUNE BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Castillo, Gerald C.	
1.3 STREET ADDRESS	8 Meir Road	
1.4 CITY-ST-ZIP	Ponte Vedra Beach FL 32082	
2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Smith, William E.	
2.3 STREET ADDRESS	926 6th Avenue North	
2.4 CITY-ST-ZIP	Jacksonville Beach FL 32250	
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Whaley, Robert H. Jr.	
3.3 STREET ADDRESS	109 Marsh Cove Dr.	
3.4 CITY-ST-ZIP	Ponte Vedra Beach FL 32082	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Ashe, John J.	
4.3 STREET ADDRESS	601 Oak St	
4.4 CITY-ST-ZIP	Neptune Beach FL 32266	
5.1 TITLE	CTR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Smith, George C., Sr.	
5.3 STREET ADDRESS	607 16th Avenue North	
5.4 CITY-ST-ZIP	Jacksonville Beach FL	
6.1 TITLE	TR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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:

SIGNATURE REQUIRED

Gerald C. Castillo
GERALD C. CASTILLO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0006304

CR2E037 (9/96)



Jacksonville Beach Lodge No. 1901
Benevolent and Protective Order of Elks

628 FIRST AVENUE NORTH
P. O. BOX 50972
JACKSONVILLE BEACH, FLORIDA 32240-0972
PHONE 249-3118

TR

*Miles, David R.
1306 Palm Circle
Jacksonville Beach Fl 32250*

TR

*Medlock, John G.
2302 Windjammer Lane
Jacksonville Fl 32224*

T

*Terrell, Albert N., Sr.
421 7th Street North
Jacksonville Beach Fl 32250*

S

*Taylor, Malcolm
1733 Williams Street
Jacksonville Beach Fl*