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May 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # 712989 (3)

1. Corporation Name

HOLLYWOOD WEST LODGE NO. 2365 OF THE BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATE

Principal Place of Business	Mailing Address
7190 DAVIE ROAD EXTENSION HOLLYWOOD FL 33024	7190 DAVIE ROAD EXTENSION HOLLYWOOD FL 33024

3. Date Incorporated or Qualified: 06/26/1967

4. FEI Number: 59-1301415 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MARTIN DEVITA
1911 NW 82ND TERR
PEMBROKE PINES FL 33024

10. Name and Address of New Registered Agent

81 Name: MICHAEL F Torra
82 Street Address (P.O. Box Number is Not Acceptable): 35 Loop Rd.
83
84 City: Hollywood **FL** 85 Zip Code: 33021

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: MICHAEL F. TORRA — Michael F. Torra — 5/21/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	ER	XX DELETE	1.1 TITLE	Exalted Ruler	XX Change ☐ Addition
NAME	MARTIN DEVITA		1.2 NAME	Michael F Torra	
STREET ADDRESS	1911 NW 82ND TERR		1.3 STREET ADDRESS	35 Loop Rd.	
CITY-ST-ZIP	PEMBROKE PINES FL		1.4 CITY-ST-ZIP	Hollywood, Fl., 33021	
TITLE	S	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	JACK CAHILL		2.2 NAME		
STREET ADDRESS	580 EGRET DR 209		2.3 STREET ADDRESS		
CITY-ST-ZIP	HALLANDALE FL		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	DINGLE, ROBERT F		3.2 NAME		
STREET ADDRESS	8570 NW 11TH CT		3.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL		3.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WHYTE, JAMES		4.2 NAME		
STREET ADDRESS	2912 ALCAZAR DR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR FL 33023		4.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	DONLON, JAMES J.		5.2 NAME		
STREET ADDRESS	6820 S.W. 5TH ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. 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 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: [illegible] 4-17-98 SECRETARY 954-963-1714