2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 712989

1. Entity Name

HOLLYWOOD WEST LODGE NO. 2365 OF THE



FILED Mar 22, 2004 8:00 am Secretary of State 03-22-2004 90073 042 ****70.00

BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF							
Principal Place of Business			Mailing Address				
7190 DAVIE ROAD EXTENSION HOLLYWOOD FL 33024			7190 DAVIE ROAD EXTENSION HOLLYWOOD FL 33024				***
2. Principal Place of Business			3. Mailing Address				
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				MOORE CR2E037 (11/03)
City & State			City & State				4. FEI Number Applied For S9-1301415 Not Applied For Not Applicable
Zip	Zip Country		Zip		Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent
. 7 81	1 FARRA	ERGUSON GUT ST. D FL 33024				treet Address 3698	HUR E. HILL SIP O. Box Number is Not Acceptable) N. UNIVERSITY DR
`•		-			c	CORAL	SPRIN95 FL Zip Code 33065 ered agent, or both, in the State of Florida. I am familiar with, and accept
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. typed or printed name of registered agent and tie it appricable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Florida Department of State							
10.	ER	OFFICERS AND D	RECTORS		11.	FR	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME	I	N, WILLIAM		Delete	TITLE	1	THUR E. HILL Change CAddition
STREET ADDRESS CITY-ST-ZIP	LIGHT VANCOUD EL 00004			STI CIT		DILLOG	98, N. UNIVERSITY DR. DRAL SPRINGS, FL. 33065
TITLE	s			☐ Delete	TITLE		☐ Change ☐ Addition
NAME	MOSHER, I				NAME	İ	/
STREET ADDRESS CHTY-ST-ZIP	7631 FARRAGUT STREET HOLLYWOOD FL 33024					odress Zip	
TITLE	T			☐ Delete	TITLE		☐ Change ☐ Addition
NAME ADDRESS	8570 NW 1	OBERT F			NAME		
STREET ADDRESS CITY-ST-ZIP		E PINES FL			STREET AD	1	
TITLE	TD			☐ Delete	TITLE	-	☐ Change ☐ Addition
NAME	WHYTE, J			□ 50,000	NAME		
STREET ADDRESS	2912 ALCA				STREET AC	l	
CITY-ST-ZIP					CITY-ST-7	ZIP	
TITLE	DIEMMAN	EMANVELE, . UELE, JOSEPH	IDSEPH	☐ Delete	TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		ERSON ST.	TSAIVE		NAME STREET AD	INDECÇ	
CITY-ST-ZIP	HOLLYWO	OOD FL 33021			CITY-ST-		ţ
TITLE	TR	DISANE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME	1	DUANE H			NAME		
STREET ADDRESS	DAVIE FL				STREET AD	l	
CITY-ST-ZIP	ļ		41 AL 200 .		CITY-ST-		
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 truestee amonowered 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 attaching with an address, with all other title ampowered.							