## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Aug 27 1997 8:00am

Secretary of State

- 1000/j. 1811 (1811 2001 1811) Jard (191 1811) Bill (1811 1811) Bill (1811 1811) Bill (1811 1811)

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

720571

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## CLEARWATER LODGE NO. 1525, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERI

Principal Place of Business		Mailing Address					
2750 SUNSET POINT RD. CLEARWATER FL \$4619		2750 SUNSET POINT RD. CLEARWATER FL 34819-1503					
					3. Date Incorporated or Qualified 03/23/1971	3a. Date of Last Report 05/01/1996	
2. Principal Place of Business		2a. Mailing Address 26			4. FEI Number 59-2321977	Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees		
Zip	Country	Zip	Country	/	8. This corporation has liability for in		
24	25	29 30	<u> </u>			Yes XNo	
	9. Name and Address of Current	Registered Agent	81		10. Name and Address of New Reg	Istered Agent	
				Name	RUSSELL V. JURGENSEN PSP		
	MILLIAM J.	82 Street A		dress∡P.O. Box Number is Not Acceptabl	θ)		
23/1 ISI APARTM	RABLI DR. IENT 27	[00]			MALMER LANE		
	ATER FL 34629 \$		84	City	CA HARBOR	85 Zip Code	
	17	1047 4500 51 11 0		) '		FL 34683	
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 territor with, and accept the objections of, Section 617.0503, Florida Statutes.							
SIGNATURE / MISCHELL. J. Mygensen 4/25/41							
Signature, typed or printed name of registered agent and title lifar discattle (NOTE: Re				ent signature re	quired when reinstating)	DATE!	
12.	OFFICERS AND	DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICE	Change Addition	
TITLE NAME	GREEN, RICHARD D.	A DECEIE	1.1 TITLE 1.2 NAME		TOSEPH SACILIANO	Change Changing	
STREET ADDRESS	2347 MOOR HAVEN DR			ADDRESS	1615 OLD COACHMAN	ed.	
CITY-ST-ZIP	OLEARWATER FL		1.4 CITÝ - S	ST-ZIP	LEARWATER, FL. 31	625	
TITLE	VD.	DELETE	2.1 TITLE		FETERMED LEADING	Change Addition	
NAME	BRÊNNER, THOMAS H.	• •	2.2 NAME		HARLES RULISON	ila	
STREET ADDRESS	2510 BRIARWOOD CT.		2.3 STREET	ADDRESS 2	0 BOX 14224 N	<del>44</del>	
CITY-ST-ZIP	OLEARWATER FL	N Patricia	2. 4 CITY-		LEARWATER, FL. 346	27	
TITLE	TD BARTENORE ANTHONY M	DELETE	3.1 TITLE		TRUSTEE	Change X Addition	
NAME STREET ADDRESS	BARTENOPE, ANTHONY M. 1818 OAK FOREST DR., W.		3.2 NAME 3.3 STREET	ADDDECC T	TOHN SCHNEIDER 13, HARBOR, WOODS C.	ROLE	
CITY-ST-ZIP	CLEARWATER FL		3.4. CITY-	CT. JID	SAFETY HARBOR, F	2 34695	
TITLE	D	DELETE	4.1 TITLE	51-111	The Scall Tal	Change Addition	
NAME	THOMAS, ROBERT L.	<b>y</b>	4. 2 NAME	]*	FOR BERLETAN	STUDGENSEN	
STREET ADDRESS	6350 N 92 PL		4.3 STREET	ADDRESS	910 PALMER LANE		
CITY-ST-ZIP	PINELLAS PARK FL		4.4 CITY-3	ST - ZIP	PALM HARBOR, FC	- 34685	
TITLE	D	DELETE	5.1 TITLE			☐ Change ☐ Addition	
NAME	<b>SLUSSER</b> , LEROY F.	(F)	5.2 NAME	Ţ			
STREET ADDRESS	1852 FOREST WOOD DR.	// /0	5.3 STREET				
CITY-ST-ZIP	CLEARWATER FL 34	619	5.4 CITY-\$	IT-ZIP		I Change I 4 Julius	
TITLE	Sp. (	DELETE	6.1 TITLE	(3)	JOHN DEVINE - 265 5 LAGOON (	· TRUSTEE A Addition	
NAME			6.2 NAME	LIDDOFA	2265 5 LAGOON (	18	
Street Address	· ·		6.3 STREET	AUDRESS	7-4-3	-11/2 n = 1	

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 outrustee ompowered to execute this report as required by Chapler 617, Florida Statutes; and that my name appears in Block 12 or Block 13 If changed, or on an attachment with an address.