FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(8)

GREATER MIAMI ELKS LODGE #1113, INC.

Principal Place of Business

Mailing Address

FILED Jun 24 1997 8:00am Secretary of State



\$150 N.W. 2ND AVENUE P. O. BOX 420647 AVE. MIAMI FL 33242-0847		5150 N.W. 2ND AVENUE P. O. BOX 420 AVE 543 MIAMI FL 33242-0647		Date Incorporated or Qualified 02/24/1972	3a. Date of Last Report 04/16/1996
2. Principal Pia	ace of Business	2a. Mailing Address	(0 /	4. FEI Number	Applied For
275150 NW 2 HVe, 26 10 BOX 4			-2054	3 59-2184447	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
+-		28 M. Smi, FZ		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Zip 24 33 1	27 25 Jac	29 33 142 30	County		Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Ri	egistered Agent
FERGUSON, EDROY C. 3180 NW 157TH ST. MIAMI FL 33054				percess (P.O. Box Number is Not Accepta	freet
	•		84 City	1, 5m2	FL 85 3 3 67
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 egistered 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, and adaptifies on the obligations of Section 617.0503, Florida Statutes.					
SIGNATURE Storatule, typed or printed name of registered agent and time it applicable. (NOTE: Registered Agent signature required when reinstating)					
12.	OFFICERS AND	DIRECTORS	13.		CERS AND DIRECTORS IN 12
TITLE	C (DELETE	1.1 TITLE	SKELLEG KNION	Change Addition
NAME	Jones, Curtis	, -	1.2 NAME	Joseph Elis	$5-1$ / $\frac{1}{2}$
STREET ADDRESS	3180 NW 157 ST		1.3 STREET ADDRESS	2290 NW 107	Street '
CITY-ST-ZIP	MIAMI FL		1.4 City-St-ZIP	Mi2mi F4 3.	3167
TITLE	TD	☑ DELETE	21 TITLE	Complet Smit	Change Addition
NAME	JOHNSON, WALTER E.		22 NAME)	Jun hins a	22-
STREET ADDRESS	2501 NW 55TH TERRACE		23 STREET ADDRESS	30000	& 33/27
CITY-ST-ZIP	MIAMI FL 33142	DELETE	2. 4 CITY-ST-ZIP	The same of	Change Addition
TITLE	BD COV DANIEL LCD	□ vereit	31 TITLE 32 NAVB D	70 Y/O 94.6 1'	
NAME	COX, DANIEL J SR. 1495 N.W. 74TH STREET	,	3.3 STREET ADDRESS	1495 N.W. 74.	Street
STREET ADDRESS	MIAMI FL 33147		3.4 CITY-ST-ZIP	Mi Donie El	33 47
CITY-ST-ZIP	FSD	DELETE	4.1 TITLE	10,100 0/10/15	Change Addition
NAME	JOHNSON, WALTER E.	4	4.2 NAM	Jones, Curtis	lenal
STREET ADDRESS	2501 N.W. 55TH TERRACE		4.3 STREET ADDRESS	2189 Novi 21/2	11 664
CITY-ST-ZIP	MIAMI FL		4.4 CITY - S1 - ZIP	Misum, FL 33	3055
TITLE	FSD	DELETE	5.1 TITLE ,	LIONELT Smill	Change Addition
NAME	SMITH, LIONAL		5.2 NAME (-5)	17221101210	γι
STREET ADDRESS	1722 NW 31ST ST.		5.3 STREET ADDRESS	1044	
CITY-ST-ZIP	MIAMI FL 33142		5.4 CITY - ST - ZIP	1722 NW 31 2 MAN Fla 3: LIONEL	3142
TITLE		☐ DELETE	6.1 THILE	LIONEL	Change Maddition
NAME			6.2 NAME	,-,-	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		The state all the state of the	6.4 CITY - ST - ZIP	440 00000 50 11 0000	
I 14. I do heret	by certify that the information supplied	with this filing does not qualify t	or the exemption sta	ated in Section 119.07(3)(i), Florida Statut	es. I turther certify that the

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 or of the corporation or the receiver or instee emocrated execute this report as required by Chapter 617, Florida Statutes; and that my name Information indic 110 I am an officer of appears in Block