


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 28 1998 8:00am
Secretary of State

| | | |
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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # 725838 (7)
1. Corporation Name
ELKETTES OF JUPITER LODGE #2469, INC.

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| Principal Place of Business 1222 US HWY 1 JUPITER FL 33477 | Mailing Address 1222 US HWY 1 JUPITER FL 33477 |
|--|--|

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|--|---|--|
| 3. Date Incorporated or Qualified 03/19/1973 | | |
| 4. FEI Number 59-6508927 | Applied For <input type="checkbox"/> | Not Applicable <input type="checkbox"/> |

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

| | |
|--|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

**BROPHY, GILBERT T.
PARKWAY PLAZA-UNIT 15
810 SATURN ST.
JUPITER FL 33477**

10. Name and Address of New Registered Agent

| | | |
|---|-------|----------|
| 81 Name | | |
| 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| 83 | | |
| 84 City | 85 FL | Zip Code |

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 Gilbert T. Brophy (NOTE: Registered Agent signature required when reinstating) DATE 4/22/98

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|--|---|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P SCHAEFER, MARGARET 916 ANGLERS WAY JUPITER FK | <input type="checkbox"/> DELETE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP ZANER, LILLIAN 225 FAIRWAY WEST TEQUESTA FL | <input type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S SWIGERT, KATHY 1100 STILLWATER DR JUPITER FL | <input type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T LEVALLEY, DOROTHY 5759 GOLDEN EAGLE CIR. PALM BEACH GARDENS FL | <input type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AT DEMERY, KAY 2555 PGA BLVD., #175 PALM BEACH GARDENS FL | <input type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T RAGO, BEA 120 QUAYSIDE DRIVE JUPITER FL | <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP |

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|---|--|
| President Lillian Zander 225 Fairway West Tequesta, Florida | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| Vice President Marion Taggart 501 South Seas Dr #105 Jupiter, FL 33477 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| Secretary Ardath Widmann 2401 Marina Isle Way #404 Jupiter, FL 33408 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| Treasurer (same) | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| AT Roberta Battis 121st Terr. N. Jupiter, FL 33477 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| Trustee Ruth Rose 158 Seabreeze Circle Jupiter, FL | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

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: Dorothy A. Bevell DATE: 4/22/98 561-648-8648

CR2E037 (10/97)