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Feb 06 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 736190 (0)

1. Corporation Name

SEMINOLE LODGE NO. 2519, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA

Principal Place of Business

Mailing Address

10717 SEMINOLE BLVD.
SEMINOLE FL 34648
US10717 SEMINOLE BLVD
SEMINOLE FL 33778-3335
US3. Date Incorporated or Qualified
06/17/19763a. Date of Last Report
01/26/19964. FEI Number
51-0171548

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EDMAN, JOHN M.
13368 84TH TERR NO.
SEMINOLE FL 34646

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

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 TD ☐ DELETE
NAME HACHEY, RAY
STREET ADDRESS 11200 102 N. UNIT 96
CITY-ST-ZIP LARGO FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME STEWART, JESSE
STREET ADDRESS 13914 84TH TERRACE NORTH
CITY-ST-ZIP SEMINOLE FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MCGINTY, HENRY
STREET ADDRESS 11800 SHIPWATCH DRIVE, #1411
CITY-ST-ZIP LARGO FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME BUTLER SR., RON
STREET ADDRESS 9230 81 AVENUE NORTH
CITY-ST-ZIP SEMINOLE FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME HILTS, DONALD
STREET ADDRESS 5979 BAYLAKE DRIVE
CITY-ST-ZIP SAINT PETERSBURG FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE S ☐ DELETE
NAME LARSON, CARL
STREET ADDRESS 10398 104TH AVENUE, NORTH, #134
CITY-ST-ZIP LARGO FL6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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:

Signature and Typed or Printed Name of Signing Officer or Director

1-28-97

(813) 397-7200

Date

Daytime Phone # 0051892

CR2E037 (9/96)