## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## **DOCUMENT # 759383**

1. Entity Namo

BROOKSVILLE BENEVOLENT PROTECTIVE ORDER OF ELKS, LODGE NO. 2582, INC.

## **FILED** Jan 25, 2007 8:00 am Secretary of State

01-25-2007 90031 004 \*\*\*\*61.25

Principal Plac	e of Business	iviailing	Address		i					
14494 CORTEZ BLVD BROOKSVILLE, FL P.O. BOX 5236 SPRING HILL FL 34606-2236		P.O. E	14494 CORTEZ BLVD BROOKSVILLE, FL P.O. BOX 5236 SPRING HILL FL 34606-2236							
2. Principal Place of Business - No P.O. Box #		3. Maili	3. Mailing Address							6   6  4   00
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			1st MOORE CR2E037 (10/06)				
City & Stat	e .	City	& State			4. FEI Number		<u> </u>	A	pplied For
						59	9-189042	20	N	ot Applicable
Zip	Country	Zip		Country		5. Certificate of Sta	tus Desired		\$8.75 Add Fee Require	
•	6. Name and Address of Cu	rrent Registered	d Agent			7. Name and Addre	ess of New	Registered	Agent	
				Name						
SMITH, HARRY L			Street Addre		ddress (F	O.O. Box Number is N	ot Acceptab	le)		
	5 GENESEE DR DOKSVILLE FL 34613				·					
DNC	JONS VILLE FL 34013									
				City	·			FI	Zip Cod	le
8. The above	named entity submits this statem	ent for the purpo	oso of changing its re	eaistered office or	register	ed agent, or both, in the	ne State of F		n familiar with.	and accept
	lions of registered agent.	iem ior ine parpe	iss or changing no re	9.5.6.704 000 0.	- cg.c.c.	od agong or boun, mra	io oldio or .	TOTTOG: T GIT	ramma man	, and addept
SIGNATURE			***							
	Signature, Typed or printed name of registere	d agent and little if appl	icable (NO1E I	Registered Agent signati.	ure required	which reinstaling)		DATE		
	•								, <u>, , , , , , , , , , , , , , , , , , </u>	
	FILE NOW: FEE IS \$61.25	[	9. Election Camp	paign Financing		\$5.00 May Be	M	ake Chec	k Payable	to
			T . C . C							
	Due By May 1, 2007		Trust Fund Co	ontribution.		Added to Fees	Flor		rtment of	
10	, <sup>-</sup>	JD DIRECTORS	Trust Fund Co			Added to Fees		ida Depa	rtment of	State
10.	OFFICERS AN	ND DIRECTORS		11.				ida Depa	rtment of	State
10. IHU NAME	OFFICERS AN	ND DIRECTORS	Trust Fund Co			Added to Fees		ida Depa	rtment of	State
IMIT	OFFICERS AN	ND DIRECTORS		<b>11.</b>		Added to Fees		ida Depa	rtment of	State
NAME	OFFICERS AN T LUDNICK, VICTOR	ND DIRECTORS		11.		Added to Fees		ida Depa	rtment of	State
HILL NAME STREET ADDRESS	OFFICERS AN T LUDNICK, VICTOR 13454 KANE RD.	· · ·		11.  IIIIE NAME STRITTADDELSS		Added to Fees		ida Depa	rtment of	State
HELL NAME STREEF ADDRESS CHY ST ZIP	OFFICERS AN T LUDNICK, VICTOR 13454 KANE RD. SPRING HILL FL 34609		☐ Defete	11. HILE NAME STRIFT ADDRESS CHY ST 7P		Added to Fees		ida Depa	rtment of S	State  V 10  Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Jan 18 2007 352-596-2582