

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763306

FILED
Jun 24, 2009
Secretary of State

Entity Name: CRESTVIEW, FLORIDA LODGE #2624, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INC.

Current Principal Place of Business:

127 W PINE AVE
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

PO BOX 153
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-2070926 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THOMAS, CHARLES G
105 THURSTON PLACE
CRESTVIEW, FL 32536 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: THAMES, RANDY
Address: 3153 AIRPORT ROAD
City-St-Zip: CRESTVIEW, FL

Title: S () Delete
Name: CLARK, WILBURN N
Address: 5984 CLARK MOORE LN
City-St-Zip: CRESTVIEW, FL 32531

Title: ER () Delete
Name: CLARK, BETTY M
Address: PO BOX 153
City-St-Zip: CRESTVIEW, FL 32536

Title: T () Delete
Name: JOHNSON, GARY
Address: PO BOX 153
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W N CLARK

SEC

06/24/2009

Electronic Signature of Signing Officer or Director

Date