2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770456

FILED Jan 13, 2009 Secretary of State

Entity Name: LAKE PLACID LODGE, NO. 2661, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE

UNITED STATES OF ÁMERICA, ÍNC.

Current Principal Place of Business: New Principal Place of Business:

B.P.O.E. #2661 USA 200 C.R. 621 EAST

LAKE PLACID, FL 33852 US

New Mailing Address: Current Mailing Address:

B.P.O.E. #2661 USA P O BOX 1085

LAKE PLACID, FL 33862 US

FEI Number: 59-2287229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANSOUSSI, DONALD 136 LAKE FRANCIS DR LAKE PLACID, FL 33852

in the State of Florida.

OFFICERS AND DIRECTORS:

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

SIGNATURE:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

GRAY, WALTER N GRAY, WALTER N Name: Name: 24 CENTRAL AVENUE Address: 104 SW 3RD AVE. Address:

City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: OKEECHOBEE, FL 34974 42

Title: Title: (X) Change () Addition () Delete

HARTZELL, JACQUELINE Name: KINSEY, JERRY Name: Address: 101 FOREVER AVE Address: 135 LAKE FRANCIS DR City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852

Title: () Delete Title: () Change () Addition

DONALD SANSOUSSI, Name: Name: 136 LAKE FRANCIS DR Address: Address: City-St-Zip: LAKE PLACID, FL City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: GRANT, JOHN R Name: GRANT, JOHN R 443 BRIGHT HILL AVENUE 137 ROSEWOOD DRIVE N Address: Address: City-St-Zip: LAKE PLACID, FL 338527984 City-St-Zip: LAKE PLACID, FL 33852

Title: () Delete Title: (X) Change () Addition

RUSSO, JOHN W HOLBROOK, JOHN Name: Name: 3012 BEECH ST 133 MELANIE DR. Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852

Title: () Delete Title: () Change () Addition

CRONISER, JOANNE Name: Name: Address: 26 JASMINE ST Address: LAKE PLACID, FL 33852 City-St-Zip: 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: DONALD SANSOUSSI Т 01/13/2009