

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90152 027 ****61.25

DOCUMENT # N03000000785					
1. Entity Name SOUTH BROWARD LODGE, NO.2830 BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AME					
Principal Place of Business 6691 PEMBROKE RD PEMBROKE PINES, FL 33023			Mailing Address 6691 PEMBROKE RD PEMBROKE PINES, FL 33023		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04282005 Chg-NP CR2E037 (10/03)	
4. FEI Number 65-1170003				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BURRIE, CHARLOTTE J ESQ 2125 E ATLANTIC BLVD POMPANO BEACH, FL 33062			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T KRISTY, TED 16748 SW 6 ST PEMBROKE PINES, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PUTMAN, BILL 401 NW 103 AVE #358 PEMBROKE PINES, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LOCKHART, DAVID A 12122 WASHINGTON ST PEMBROKE PINES, FL 33025		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HARDING, JACK 4033 WASHINGTON ST HOLLYWOOD, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Alfano, Alfonso 2099 NW 127th Ave. Pembroke Pines, FL 33028 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CONIAN, MICHAEL 7550 LA SALLE BLVD MIRAMAR, FL		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CHOCHREK, WALTER R 9500 SW 7TH STREET PEMBROKE PINES, FL 33025		TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Good, Thomas 9521 SW 130th Ave. Pembroke Pines, FL 33025 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Paul A. Leblond</i>			4/29/05 305-325-1930		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

ATTACHMENT
20057824

2005 Not For Profit Corporation
Annual Report

Document# N03000000785

Entity Name

South Broward Lodge, No.2830
Benevolent and
Protective Order of Elks of the United
States of America

11. Additions to Officers and Directors in 10

Title	P, T
Name	Lockhart, David, A.
Street Address	12122 Washington Street
City-St-Zip	Pembroke Pines, FL 33025

Title	T
Name	Conlan, Marjorie
Street Address	7550 LaSalle Blvd.
City-St-Zip	Miramar, FL 33023

Title	T
Name	Jobes, George
Street Address	6516 Wiley Street
City-St-Zip	Hollywood, FL 33023

Title	S
Name	Lind, James
Street Address	7151 SW 12th Street
City-St-Zip	Pembroke Pines, FL 33023

Title	T
Name	Bonawitz, Mark
Street Address	1266 SW 116th Way
City-St-Zip	Davie, FL 33325

Title	T
Name	Mallet, Judy A.
Street Address	5061 SW 121 Terrace
City-St-Zip	Cooper City, FL 33330