


FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 30 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N13786** (1)  
1. Corporation Name  
**ROTONDA ELKS, #2710, INC.**



Principal Place of Business <b>303 ROTUNDA BLVD. EAST ROTONDA WEST FL 33947 US</b>		Mailing Address <b>303 ROTUNDA BLVD. EAST ROTONDA WEST FL 33947 US</b>		3. Date Incorporated or Qualified <b>03/11/1996</b>	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number <b>59-2695411</b>	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
22	City & State	27	City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
23	Zip	28	Zip	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>DAVID, ROBERT M 13542 OVERTON AVE PORT CHARLOTTE FL 33981</b>				10. Name and Address of New Registered Agent	
				81	Name <b>ABER, JOHN C.</b>
				82	Street Address (P.O. Box Number is Not Acceptable) <b>4155 Cape Haze Dr.</b>
				83	
				84	City <b>Placida</b>
				85	Zip Code <b>FL 33946</b>

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 JOHN C. ABER John C. Aber 4-24-98  
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	DS	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	TR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DOUGLAS, CLIFFORD		1.2 NAME	LEWIS, CHARLES			
STREET ADDRESS	9381 BANDERA LANE		1.3 STREET ADDRESS	116 Sportsman Rd.			
CITY-ST-ZIP	PORT CHARLOTTE FL		1.4 CITY-ST-ZIP	Rotonda West, FL 33947			
TITLE	TR	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	TR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ABER, JOHN C		2.2 NAME	LINTON, DAVID			
STREET ADDRESS	4155 CAPE HAZEN DR		2.3 STREET ADDRESS	89 Caddy Rd.			
CITY-ST-ZIP	PLACID FL		2.4 CITY-ST-ZIP	Rotonda West, FL 33947			
TITLE	ER	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	ER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMITH, ROBERT		3.2 NAME	RICKARD, WILLIAM A.			
STREET ADDRESS	13542 OVERTON AVE		3.3 STREET ADDRESS	5306 Forbes Terr.			
CITY-ST-ZIP	PT CHARLOTTE FL		3.4 CITY-ST-ZIP	Pt. Charlotte, FL 33981			
TITLE	TR	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	TR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SUMMITT, LARRY E		4.2 NAME	ROACH, GEORGE			
STREET ADDRESS	9238 MELODY CIR		4.3 STREET ADDRESS	138 Mark Twain Ln.			
CITY-ST-ZIP	ROTONDA WEST FL		4.4 CITY-ST-ZIP	Rotonda West, FL 33947			
TITLE	TR	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WHEATING, DONALD		5.2 NAME				
STREET ADDRESS	214 MARK TWAIN LANE		5.3 STREET ADDRESS				
CITY-ST-ZIP	ROTONDO WEST FL		5.4 CITY-ST-ZIP				
TITLE	TREA	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	TREA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	TOWNSEND, JOEL W		6.2 NAME	DIGNOTTI, BARBARA			
STREET ADDRESS	4654 ARLINGTON DR		6.3 STREET ADDRESS	9422 Gulfstream			
CITY-ST-ZIP	WINDWARD CAPE HAZE FL		6.4 CITY-ST-ZIP	Englewood, FL 34224			

14. 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 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: John C. Aber JOHN C. ABER Apr 8, 1998 941-697-2208

CR2E037 (10/97)