
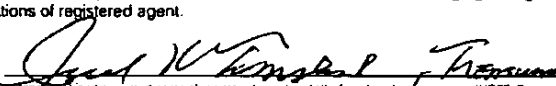
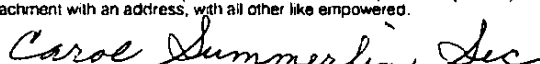


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 29, 2008 8:00 am**  
**Secretary of State**

08-07-2008 90064 001 \*\*\*\*61.25

<b>DOCUMENT # N13786</b> 1. Entity Name <b>ROTONDA ELKS, #2710, INC.</b>					
Principal Place of Business <b>303 ROTUNDA BLVD. EAST ROTUNDA WEST FL 33947 US</b>			Mailing Address <b>303 ROTUNDA BLVD. EAST ROTUNDA WEST FL 33947 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip		City & State  Zip		4. FEI Number <b>59-2695411</b>	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>SUMMERLIN, CAROL 303 ROTUNDA BLVD. EAST ROTUNDA WEST FL 33947</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;">           SIGNATURE   <small>(Signature, typed or printed name of registered agent and title if applicable)</small> </div> <div style="width: 20%; text-align: center;"> <small>(NOTE: Registered Agent signature required when re-registering)</small> </div> <div style="width: 40%; text-align: right;">           DATE         </div> </div>					
<b>FILE NOW: FEE IS \$61.25 Due By September 3, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make Check Payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TRP</b> <b>THOMPSON, LARRY</b> <b>135 ANNAPOLIS LN</b> <b>ROTUNDA WEST FL 33947</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TRUSTEE</b> <b>Wm. BEICHLER</b> <b>432 BOUNDARY BLVD</b> <b>ROTUNDA WEST, FL 33947</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TR</b> <b>LAWTON, CAROLYN</b> <b>6991 BEARDSLEY</b> <b>ENGLEWOOD FL 34224</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ER</b> <b>EIFENS, RAY</b> <b>24 GARLAND HILLS CT</b> <b>ROTUNDA WEST FL 33947</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ERP</b> <b>JAY SMYTHE, JR</b> <b>6243 CONISTON ST.</b> <b>PORT CHARLOTTE, FL 33981</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>SUMMERLIN, CAROL</b> <b>7518 RATON CIR</b> <b>PORT CHARLOTTE FL 33981</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>TOWNSEND, JOEL</b> <b>4654 ARLINGTON DR</b> <b>PLACIDA FL 33946</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="display: flex; justify-content: space-between;"> <span><b>8-26-08</b></span> <span><b>941-697-2708</b></span> </div> <small>Date Daytime Phone #</small>		

66016160



2nd MOORE CR2E037 (4/08)