

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2004 8:00 am
Secretary of State

04-19-2004 90276 007 ****61.25

DOCUMENT # N14209					
1. Entity Name PERRY LODGE, NO. 1851, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES, INC.					
Principal Place of Business 305 PUCKETT ROAD P.O. BOX 986 PERRY, FL 32348 US			Mailing Address 305 PUCKETT ROAD P.O. BOX 986 PERRY, FL 32348 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-0948317	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOYAL, CHARLES R 305 PUCKETT ROAD PERRY, FL 32348			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
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 _____ Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$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	D YOUNG, ERVIN ROUTE 5 BOX 403 PERRY, FL 32347	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert Woodford 1572 Pine Crest Dr Perry, FL 32347	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LLOYD, DAVID 1205 CARTER ST PERRY, FL 32348	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Charles R Joyal 3475 Quail St Perry, FL 32348	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGNER, RAY D. ROUTE 4, BOX 528 3435 GREEN FARM RD PERRY, FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wayne Connell 6385 West US 98 Perry, FL 32347	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRUCE, RICHARD P O BOX 986 SHADY GROVE, FL 32357	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Roscoe Sheffield 102 Osceola Rd Perry, FL 32347	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 817, 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>Charles R Joyal</i>			4-13-04 850-223-3952		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone		