

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31174

FILED  
Feb 21, 2011  
Secretary of State

**Entity Name:** NORTH FORT MYERS LODGE #2742 BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA CORPORATION

**Current Principal Place of Business:**

2163 TWIN BROOKS ROAD  
NORTH FT. MYERS, FL 33917 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4508  
NORTH FT. MYERS, FL 339184508 US

**New Mailing Address:**

**FEI Number:** 65-0110605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENDALL, BERNICE ER  
706 LBJ LANE  
N FT MYERS, FL 33917 US

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

JUDY, HANSON  
2163 TWIN BROKS  
N FT MYERS, FL 33917 US

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.

SIGNATURE: JUDY HANSON

02/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: JUDY, HANSON P  
Address: 2163 TWIN BROOKS  
City-St-Zip: N FT MYERS, FL 33917

Title: SEC  
Name: JOSLIN, RICHARD E  
Address: 8217 BOONESBORO RD  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: TRES  
Name: PHELPS, WESLEY L  
Address: 13830 WILLOW BRIDGE DR  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TRUS  
Name: WOOD, LAWRENCE J  
Address: 3861 PONYTAIL PALM CT  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: TRUS  
Name: SAMPLES, GERALD L  
Address: 3423 ORCHARD WAY  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: TRUS  
Name: CONNER, THOMAS D  
Address: 2800 RUSTIC LANE  
City-St-Zip: NORTH FORT MYERS, FL 33917

I hereby 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 all other like empowered.

SIGNATURE: WESLEY L PHELPS

TRES

02/21/2011

Electronic Signature of Signing Officer or Director

Date