

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31997

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: B & S COMBS ELKS LODGE #1599, INC.

**Current Principal Place of Business:**

1688 NE WASHINGTON STREET  
LAKE CITY, FL 32056

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3605  
LAKE CITY, FL 32056

**New Mailing Address:**

FEI Number: 59-2951842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEATHERSPOON, ROBERT L  
418 SW ACE LANE  
LAKE CITY, FL 32025 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: HENRY, EDMUND  
Address: P.O. BOX 485  
City-St-Zip: LAKE CITY, FL 32025

Title: P ( ) Delete  
Name: WEATHERSPOON, ROBERT L  
Address: 418 SW ACE LANE  
City-St-Zip: LAKE CITY, FL 32025

Title: VP ( ) Delete  
Name: ANDERS, RICHARD  
Address: 628 NW JEFFERSON ST  
City-St-Zip: LAKE CITY, FL 32055

Title: S ( ) Delete  
Name: BROWN, CHARLES  
Address: 3416 SW SISTERS WELCOME RD.  
City-St-Zip: LAKE CITY, FL 32025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: BROWN, TERRY  
Address: 862 NE FAMU LANE  
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT L WEATHERSPOON

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date