

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 09 1997 8:00am
Secretary of State

DOCUMENT # **N33709** (9)

1. Corporation Name

SARASOTA LODGE NO. 1519 BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA

Principal Place of Business

**2635 FRUITVILLE ROAD
SARASOTA FL 34237**

Mailing Address

**2635 FRUITVILLE ROAD
SARASOTA FL 34237-5222**



3. Date Incorporated or Qualified
08/10/1989

3a. Date of Last Report
05/20/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number
59-0523343

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**POZZI, FRANCIS A
2635 FRUITVILLE RD
SARASOTA FL 34237**

81 Name
S. Raymond Bibisi

82 Street Address (P.O. Box Number is Not Acceptable)
2324 Riverwood Pines Drive

83

84 City
Sarasota

FL **85** Zip Code
34231

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 **S. Raymond Bibisi**

April 8, 1997

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 **CD** ☒ DELETE

NAME **POZZI, FRANCIS A**
STREET ADDRESS **7133 W. COUNTRY CLUB DR.**
CITY-ST-ZIP **SARASOTA FL 34243**

TITLE **SD** ☐ DELETE

NAME **BIBISI, RAYMOND S**
STREET ADDRESS **2324 RIVERWOOD PINES DR.**
CITY-ST-ZIP **SARASOTA FL 34231**

TITLE **D** ☐ DELETE

NAME **TURNER, ROBERT C**
STREET ADDRESS **3729 ALLENWOOD DR.**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☐ DELETE

NAME **KRUSE, ROLAND**
STREET ADDRESS **4751 HAMLETS GROVE DR.**
CITY-ST-ZIP **SARASOTA FL 34235**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE

[Signature]

[Signature]

CR2E037 (9/96)