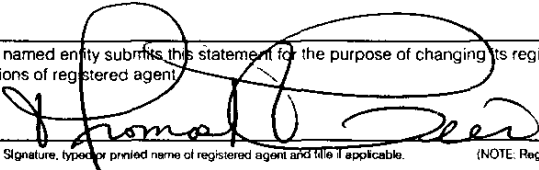
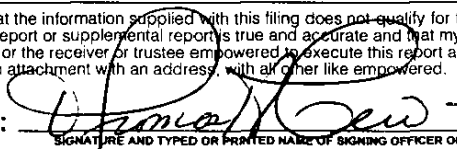


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2007 8:00 am
Secretary of State

03-27-2007 90007 042 ****70.50

DOCUMENT # N46674 1. Entity Name DEEP CREEK LODGE, NO. 2763, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMER					
Principal Place of Business 1133 CAPRICORN BLVD. PUNTA GORDA, FL 33983 US			Mailing Address 1133 CAPRICORN BLVD. PUNTA GORDA, FL 33983 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State City State		City & State City State		4. FEI Number 65-0310937	
Zip Country		Zip Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GEIS, THOMAS 18689 OHARA DR PORT CHARLOTTE, FL 33954				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City State 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, typewritten name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) MARCH 15, 2007 DATE					
Filing Fee is \$61.25 Due by May 1, 2007		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	D NAME ZOCO, HELEN STREET ADDRESS 23511 LARK AVE CITY-ST-ZIP PORT CHARLOTTE, FL 33954	☒ Delete	TITLE	D NAME TRUMAN A. BASS STREET ADDRESS 27581 TERRA DEL FUEGO CITY-ST-ZIP PUNTA GORDA FL 33983	☐ Change ☒ Addition
TITLE	D NAME DELISLE, JULIAN STREET ADDRESS 2508 RIO DE JANEIRO CITY-ST-ZIP PUNTA GORDA, FL 33983	☒ Delete	TITLE	D NAME DANIEL CHIARA (D) STREET ADDRESS 1451 STRASBURG DRIVE CITY-ST-ZIP PORT CHARLOTTE FL 33952-2732	☐ Change ☒ Addition
TITLE	D NAME WAGNER, EDWARD STREET ADDRESS 2100 KINGS HIGHWAY CITY-ST-ZIP PORT CHARLOTTE, FL 33980	☒ Delete	TITLE	(D) NAME BRUCE WOODHOUSE STREET ADDRESS 487 HARBOR BLVD CITY-ST-ZIP PORT CHARLOTTE 33954	☐ Change ☒ Addition
TITLE	S NAME KATRYNIUK, MICKEY STREET ADDRESS 333 SPRINGVIEW CIR NW CITY-ST-ZIP PORT CHARLOTTE, FL 33948	☒ Delete	TITLE	TREASURE NAME KEVIN CROUCH STREET ADDRESS 137 SANTAREM CIR. CITY-ST-ZIP PUNTA GORDA FL 33983-4211	☐ Change ☒ Addition
TITLE	T NAME LEARNED, BARBARA STREET ADDRESS 25969 AVSEN DR CITY-ST-ZIP PUNTA GORDA, FL 33983	☐ Delete	TITLE	SECRETARY NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
TITLE	P NAME PELL, ROBERT STREET ADDRESS 2181 TAIWAN CT CITY-ST-ZIP PUNTA GORDA, FL 33983	☒ Delete	TITLE	(P) NAME THOMAS A GEIS STREET ADDRESS 18689 OHARA DR CITY-ST-ZIP PORT CHARLOTTE FL 33954	☐ Change ☒ Addition
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 reports 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:  Thomas A. Geis 3/15/2007 941-255 3338 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					