

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N48337

1. Entity Name

PALM BAY LODGE NUMBER 2766 OF THE BENEVOLENT AND

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90083 045 ****61.25

Principal Place of Business

Mailing Address

1155 MALABAR RD
SUITES 1 AND 2
PALM BAY FL 32907

PO BOX 100046
PALM BAY FL 32910-0046
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

59-3093089

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~HEYDINGER, HERMAN~~
539 PETAL RD NE
PALM BAY FL 33907

Name

Catherine D. Underwood

Street Address (P.O. Box Number is Not Acceptable)

357 Fernandina St NW

City

Palm Bay

FL

Zip Code
32907

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.

SIGNATURE Catherine D. Underwood, D

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Catherine D. Underwood 2-26-00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DS ☒ Delete
NAME BREWER, ALICE M
STREET ADDRESS 1661 SANDUSKY ST SE
CITY-ST-ZIP PALM BAY FL 32909

TITLE D ☐ Delete
NAME UNDERWOOD, CATHY
STREET ADDRESS 357 FERNANDINA ST NW
CITY-ST-ZIP PALM BAY FL 32907

TITLE D ☐ Delete
NAME DAVIS, JOHN
STREET ADDRESS 1073 NEWBERN ST NE
CITY-ST-ZIP PALM BAY FL 32905

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS ☐ Change ☒ Addition
NAME William J. Dupras
STREET ADDRESS 1191 Greenvview CT NE
CITY-ST-ZIP Palm Bay, Fl 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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 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: William J. Dupras
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-29-00

321-721-8290

CR2E037 (9/99)