

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000015

FILED  
Apr 22, 2008  
Secretary of State

**Entity Name:** ARCADIA LODGE, NUMBER 1524, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INC.

**Current Principal Place of Business:**

1028 WEST OAK STREET  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

1028 WEST OAK STREET  
ARCADIA, FL 34266

**New Mailing Address:**

**FEI Number:** 65-0478967

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEENE, KEITH  
615 W. EFFIE STREET  
ARCADIA, FL 34266 US

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

KEENE, KEITH  
1028 W. OAK STREET  
ARCADIA, FL 34266 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: KEITH KEENE

04/22/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NEWTON, JOE  
Address: 1028 W. OAK STREET  
City-St-Zip: ARCADIA, FL 34266

Title: T ( ) Delete  
Name: DURRANCE, KEVIN  
Address: 1028 W OAK STREET  
City-St-Zip: ARCADIA, FL 34266

Title: D ( ) Delete  
Name: SARGENT, DONALD  
Address: 1028 W. OAK STREET  
City-St-Zip: ARCADIA, FL 34266

Title: D ( ) Delete  
Name: MERCER, RONNIE  
Address: 1028 W OAK STREET  
City-St-Zip: ARCADIA, FL 34266

Title: S ( ) Delete  
Name: HIGGINBOTHAM, NANCY  
Address: 1028 W. OAK STREET  
City-St-Zip: ARCADIA, FL 34266

Title: D ( ) Delete  
Name: BURNS, BRIAN T  
Address: 3662 N.W. CNTY RD. 661  
City-St-Zip: ARCADIA, FL

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

Title: D (X) Change ( ) Addition  
Name: TUCKER, JACKIE  
Address: 1028 W. OAK STREET  
City-St-Zip: ARCADIA, FL 34266

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

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

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: KEITH KEENE

A

04/22/2008

Electronic Signature of Signing Officer or Director

Date