

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 JAN -9 PM 4: 34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N94000003867 (8)

1. Corporation Name

**THE GRAND LODGE OF FLORIDA KNIGHTS OF PYTHIAS, J
ULIUS A. LOPATA, SCHOLARSHIP FOUNDATION, INC.**

Principal Place of Business

Mailing Address

**C/O RICHARD BLOCK
2171 NW 93RD LANE
SUNRISE FL 33322
US**

**C/O RICHARD BLOCK
2171 NW 93RD LANE
SUNRISE FL 33322
US**

3. Date Incorporated or Qualified

08/05/1994

4. FEI Number

65-0537275

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WASSERMAN, RICHARD W ESQ
420 LINCOLN ROAD
MIAMI BEACH FL 33139**

81 Name

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

83

84 City

FL

85 Zip Code

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

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 **PD** ☐ DELETE
NAME **BLOCK, RICHARD**
STREET ADDRESS **2171 NW 93RD LANE**
CITY-ST-ZIP **SUNRISE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
700002398597--4
-01/13/98--01078--019
*******61.25 *****61.25**

TITLE **VP** ☐ DELETE
NAME **LADNER, MARVIN**
STREET ADDRESS **1100 SOUTHWEST 130TH AVE. H-109**
CITY-ST-ZIP **PEMBROKE PINES FL**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **SD** ☐ DELETE
NAME **GLASS, GARY A**
STREET ADDRESS **18914 LATONA PLACE**
CITY-ST-ZIP **BOCA RATON FL 33434**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **VICKNESS, STEPHEN**
STREET ADDRESS **1831 SW 51ST TERRACCE**
CITY-ST-ZIP **PLANTATION FL 33317**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **ARTHUR MESTEL**
STREET ADDRESS **4200 Hillcrest Dr.**
CITY-ST-ZIP **Hollywood, Fl. 33021**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, or on an attachment with an address.

SIGNATURE: **Richard Block** **Richard Block** **954** **741-8438**

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