

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000817

FILED
Apr 30, 2009
Secretary of State

Entity Name: TARPON SPRINGS BPO ELKS LODGE #1719, INC.

Current Principal Place of Business:

237 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 447
TARPON SPRINGS, FL 346880447

New Mailing Address:

FEI Number: 59-0662830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARRIS, WILLIAM
237 SOUTH PINELLAS AVE
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

CHIACCIO, BARBARA
237 SOUTH PINELLAS AVE
TARPON SPRINGS, FL 34689 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: BARBARA CHIACCIO

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: SARRIS, WILLIAM
Address: 237 S PINELLAS AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TD () Delete
Name: VUKCEVIC, KAREN
Address: 237 S PINELLAS AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: PD () Delete
Name: FARRAR, JOHN M
Address: 74 HIGHLAND RD
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: CHIACCIO, BARBARA
Address: 237 S PINELLAS AVE
City-St-Zip: TARPON SPRINGS, FL 34689

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: KAREN VUKCEVIC

TRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date