04261999-90055-020-$61.25-$61.25

FILED
Apr 26, 1999 8:00 am
Secretary of State
04-26-1999 90055 020 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000004373

1. Corporation Name

WAUCHULA LODGE, NO. 1700, BENEVOLENT AND PROTECT IVE ORDER OF ELKS OF THE UNITED STATES OF AMERIC

563804 - 90003 - 31

Principal Place of Business	Mailing Address
318 WEST MAIN STREET WAUCHULA FL 33873	318 WEST MAIN STREET WAUCHULA FL 33873

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 09/13/1995
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0760435 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RAMON DISHARON 318 WEST MAIN STREET WAUCHULA FL 33873	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 Ramon Disharoon 4-15-99
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALDRON, GERALD G 212 NORTH 1ST AVENUE WAUCHULA FL 33873	T	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Mark Lambert P.O. BOX 1513 WAUCHULA, FL 33873	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O BEASLEY, CONNIE 1005 KNOLLWOOD CIRCLE WAUCHULA FL 33873	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Alisa Waldron 421 DANSBY RD. WAUCHULA, FL 33873	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DISCHMAN, WANDA 301 NORTH 9TH AVE WAUCHULA FL 33873	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Dis haroon, Wanda 301 North 9th Ave Wauchula, Fla. 33873	T ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOOTEN, LENORA P.O. BOX 715 N/A WAUCHULA FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GILL, BOB P.E.R. NE LOCKMILLER ROA ZOLOFO SPRINGS FL 33834	☐ DELETE T	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, JACK D 315 RIVERSIDE DR. WAUCHULA FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	Helen Anderson P.O. BOX 114 ZOLFO SPRINGS, FL 33890	☐ Change ☒ Addition

CR2E037 (11/98)

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, with all other like empowered.

SIGNATURE: Ramon Disharoon 4-15-99 941-773-3450
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Ramon D. Sharoon