

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005329

FILED
Apr 24, 2008
Secretary of State

Entity Name: BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, PLANT CITY LODGE NO. 1727, INC.

Current Principal Place of Business:

1501 ALEXANDER STREET NORTH
PLANT CITY, FL 33566 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 836
PLANT CITY, FL 33564 US

New Mailing Address:

FEI Number: 59-0671725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, MICHAEL F
C/O HEALTH GROUP BENEFITS, INC.
110 W REYNOLDS ST
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: YATES, JERRY S
Address: PO BOX 836
City-St-Zip: PLANT CITY, FL 335640836

Title: D () Delete
Name: LYONS, ERNEST G
Address: PO BOX 836
City-St-Zip: PLANT CITY, FL 335640836

Title: D () Delete
Name: LABARBERA, FRANK
Address: PO BOX 1395
City-St-Zip: PLANT CITY, FL 335641395

Title: D () Delete
Name: HALL, JAMES R
Address: PO BOX 836
City-St-Zip: PLANT CITY, FL 335640836

Title: D () Delete
Name: LUDWICK, THOMAS
Address: 2804 PINE CLUB DR
City-St-Zip: PLANT CITY, FL 33567

Title: T () Delete
Name: PARRISH, STEPHEN R
Address: 901 W MORSE ST
City-St-Zip: PLANT CITY, FL 335632241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LABARBERA, FRANK
Address: PO BOX 1395
City-St-Zip: PLANT CITY, FL 335641395

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

Title: S (X) Change () Addition
Name: SPIVEY, WILLIAM
Address: 2605 EAGLE GREENS DR
City-St-Zip: PLANT CITY, FL 335669318

Title: D (X) Change () Addition
Name: SPRINGER, MARION T
Address: 13831 HWY 92 EAST
City-St-Zip: DOVER, FL 335273805

Title: D (X) Change () Addition
Name: BROWNLEE, CARL
Address: 1446 WALDEN OAKS PL
City-St-Zip: PLANT CITY, FL 335636875

Title: T (X) Change () Addition
Name: BENNETT, BARBARA B
Address: 502 E VIRGINIA AVE
City-St-Zip: PLANT CITY, FL 335637026

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: BARBARA B BENNETT

T

04/24/2008

Electronic Signature of Signing Officer or Director

Date