


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007 8:00 am
Secretary of State

04-06-2007 90039 011 ****61.25

DOCUMENT # N98000002045 1. Entity Name LADIES OF THE ELK #2596, INC.					
Principal Place of Business 4631 S.E. 10TH PLACE CAPE CORAL, FL 33904			Mailing Address C.C. LADIES OF THE ELKS PO BOX 101703 CAPE CORAL, FL 33910		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	02122007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-2221474				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEEL, TESS 1741 SE 46TH LANE #203 CAPE CORAL, FL 33904			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Kay Burroughs</i></u> <u>4/2/07</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR KOTULSKI, LORI 18255 SE 41ST STREET, 1-C CAPE CORAL, FL 33904	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Kay Burroughs 2244 SW 38th St. Cape Coral, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEEL, TESS 1714 SE 46TH LANE, # 203 CAPE CORAL, FL 33904	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Linda Nelson 4203 Pelican Blvd. Cape Coral, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BENENCOURT, RUTH 1302 SE 42ND STREET CAPE CORAL, FL 33904	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee (3yr) Tess Peel 1741 SE 46th Lane #203 Cape Coral, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NUZZER, PAT 3615 SE 3RD AVE NW CAPE CORAL, FL 33904	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Nancy Hepburn 2121 Karnal Pkwy. Cape Coral, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR SCHWARZ, BEVERLY 238 SE 46TH LANE CAPE CORAL, FL 33904	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee (2yr) Lori Kotulski 1825 SE 41st St. 1-C Cape Coral, FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PETUTERUTI, JUNE 11960 KING JAMES CAPE CORAL, FL 33991	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee (1yr) Bettencourt, Ruth 1302 SE 42nd St. Cape Coral, FL 33904
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <u><i>Kay Burroughs</i></u> <u>4/2/07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					