2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004009

Apr 28, 2010 Secretary of State

Entity Name: CLEWISTON LODGE, NO. 1853, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE

UNITED STATES OF AMERICA, INC.

Current Principal Place of Business: New Principal Place of Business:

250 NORTH FRANCISCO STREET CLEWISTON, FL 33440

Current Mailing Address: New Mailing Address:

P.O. BOX 583 CLEWISTON, FL 33440

FEI Number: 59-0678875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBINSON, DAVID

250 N FRANSISCO

CLEWISTON, FL 33440 US

BAUCUM, LES

250 N FRANSISCO

CLEWISTON, FL 33440 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: LES BAUCUM 04/28/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: S

 Name:
 MARTIN, TINA

 Address:
 524 E. OSCEOLA AVE

 City-St-Zip:
 CLEWISTON, FL 33440

Title: T

 Name:
 CLARK, STEVE

 Address:
 P.O. BOX 583

 City-St-Zip:
 CLEWISTON, FL 33440

Title: TR

Name: ROBINSON, HAROLD D Address: P.O. BOX 583

City-St-Zip: CLEWISTON, FL 33440

Title: TR

Name: MACK, JOHN Address: P.O. BOX 583

City-St-Zip: CLEWISTON, FL 33440

Title: TF

Name: ROBINSON, HAROLD S

Address: PO BOX 583

City-St-Zip: CLEWISTON, FL 33440

Title: TR

Name: GATTONE, ROY Address: P.O. BOX 583

City-St-Zip: CLEWISTON, FL 33440

I hereby 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 all other like empowered.

SIGNATURE: TINA MARTIN S 04/28/2010