

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90043 024 ****70.00

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1. Corporation Name

PANAMA CITY ELKS LODGE, NO 1598 BENEVOLENT AND P
ROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF

Principal Place of Business

101 W BEACH DRIVE
PANAMA CITY FL 32401

Mailing Address

101 W BEACH DRIVE
PANAMA CITY FL 32401

P.O. Box 190
PANAMA CITY
FL 32402



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 P.O. Box 190

Suite, Apt. #, etc.

28 City & State

PANAMA CITY

Zip

Country

29 32402

30 BAY

3. Date Incorporated or Qualified

07/22/1998

4. FEI Number

59-1094850

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing

□

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

JACQUES, VESTER A
101 W BEACH DRIVE
PANAMA CITY FL 32401

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME HALL, ROSCOE
STREET ADDRESS 1306 CORNELL DRIVE
CITY-ST-ZIP PANAMA CITY FL 32405

TITLE D ☒ DELETE

NAME FAHLGREN, ROBERT
STREET ADDRESS 1806 VERMONT AVE
CITY-ST-ZIP LYNN HAVEN FL 32444

TITLE D ☐ DELETE

NAME SANTOS, PAUL
STREET ADDRESS 4406 BROOK FOREST DRIVE
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE D ☐ DELETE

NAME DUKE, HUGH
STREET ADDRESS 2807 AGNES SCOTT DRIVE
CITY-ST-ZIP PANAMA CITY FL 32405

TITLE D ☐ DELETE

NAME PLATTS, ARTHUR G
STREET ADDRESS 1201 E PARK ST
CITY-ST-ZIP PANAMA CITY FL 32404

TITLE D ☐ DELETE

NAME JACQUES, VESTER A
STREET ADDRESS 224 N MACARTHUR AVE
CITY-ST-ZIP PANAMA CITY FL 32401

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☒ Addition

1.2 NAME MICHAEL HILL
1.3 STREET ADDRESS 1415 BAKER COURT
1.4 CITY-ST-ZIP PANAMA CITY, FL 32401

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME DAVID L. BARRY
2.3 STREET ADDRESS 305 S. GAY AVE
2.4 CITY-ST-ZIP PANAMA CITY, FL 32405

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE REQUIRED

Vester A. Jacques

(850) 785-4380

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #