

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006433

FILED
Feb 10, 2005
Secretary of State

Entity Name: DELRAY BEACH LODGE #2719, INC.

Current Principal Place of Business:

325 NW 22ND STREET
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

325 NW 22ND STREET
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 65-0959616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBANO, RONALD F
325 NW 22ND STREET
DELRAY BEACH, FL 33444 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: PD () Delete
Name: ALBANO, RONALD F DR
Address: 325 NW 22ND STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: S () Delete
Name: BOZZUTO, JEAN M
Address: 1850 HOMEWOOD APT # 1-104
City-St-Zip: DELRAY BEACH, FL 33445

Title: T () Delete
Name: RENZA, JOSEPH
Address: 8169 ROSE MARIE AVE. W.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD () Delete
Name: BLANCHETTE, HAROLD
Address: 905 MISSION HILL RD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: FS () Delete
Name: DENTE, RONALD
Address: 1062 NORTH DRIVE
City-St-Zip: DELRAY BEACH, FL 33445

Title: ORA () Delete
Name: PITTARO, SAM
Address: 2148 SHERWOOD FOREST B14
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RONALD F. ALBANO

PD

02/10/2005

Electronic Signature of Signing Officer or Director

Date