## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708980** 

**Entity Name:** HOLIDAY ISLES LODGE NO.1912 INC., BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA

FILED
Apr 30, 2015
Secretary of State
CC6353206255

## **Current Principal Place of Business:**

B.P.O. ELKS 14111 E. PARSLEY DRIVE, BOX 8066 MADEIRA BEACH, FL 33708

## **Current Mailing Address:**

B.P.O. ELKS 14111 E. PARSLEY DRIVE, BOX 8066 MADEIRA BEACH, FL 33708

FEI Number: 59-0745159 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILLIAMS, ANN 14183 E PARSLEY DR MADERA BEACH, FL 33708 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: ANN WILLIAMS 04/30/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title CHRM

NameWILLIAMS, ANNNameDEMARZO, TONYAddressB.P.O. ELKSAddress14183 E PARSLEY DR

14111 E. PARSLEY DRIVE, BOX 8066 City-State-Zip: MADEIRA BEACH FL 33708

City-State-Zip: MADEIRA BEACH FL 33708

Title SECRETARY

Title SECRETARY

Name BRESLIN, ERIC

Name FRITZ. DEBBIE

Address B.P.O. ELKS
Address 14183 E PARSELY DR 14111 E. PARSLEY DRIVE, BOX 8066

City-State-Zip: MADEIRA BEACH FL 33708 City-State-Zip: MADEIRA BEACH FL 33708

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: ANN WILLIAMS TRES 04/30/2015