

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763306

Entity Name: CRESTVIEW, FLORIDA LODGE #2624, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INC.**FILED**
Mar 14, 2023
Secretary of State
2223074578CC**Current Principal Place of Business:**127 W PINE AVE
CRESTVIEW, FL 32536**Current Mailing Address:**PO BOX 153
CRESTVIEW, FL 32536**FEI Number: 59-2070926****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SNELGROVE, CHRIS
CHRISTOPHER R SNELGROVE ER
3271 PLEASANT TER
CRESTVIEW, FL 32539 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: CHRIS SNELGROVE****03/14/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** LECTURING KNIGHT
Name MCMULLEN, DEBORAH
Address 5105 EAGLE WAY
City-State-Zip: CRESTVIEW FL 32539**Title** TRUSTEE
Name PILCHER, NIKI TRUSTEE
Address 101 MOHAWK TRAIL
City-State-Zip: CRESTVIEW FL 32536**Title** TRUSTEE
Name SCHRYVER, KRISTY
Address 495 JOHN KING RD
City-State-Zip: CRESTVIEW FL 32539**Title** TRUSTEE
Name WRIGHT, JAMES
Address 5342 LOWELL MASON RD
City-State-Zip: CRESTVIEW FL 32539**Title** TREASURER
Name RAPPELLI, AMANDA J TREASURER
Address 6308 ANTIGONE CIRCLE
City-State-Zip: CRESTVIEW FL 32536

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: AMANDA RAPPELLI**TREASURER****03/14/2023**

Electronic Signature of Signing Officer/Director Detail

Date