DOCUMENT# N0000007178

Entity Name: LAKE CITY ELKS CLUB, INC.

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

259 NE HERNANDO AVE. LAKE CITY, FL 32055

### **Current Mailing Address:**

P.O. BOX 1122 LAKE CITY, FL 32056

## FEI Number: 59-0604454

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

WITT, STEPHEN M 259 NE HERNANDO AVE. LAKE CITY, FL 32055 US Certificate of Status Desired: Yes

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	IGNATURE: STEPHEN WITT			04/14/2023
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	CHAIRMAN	
Name	SAMSON, CHRIS	Name	CARROLL, SCOTT	
Address	259 NE HERNANDO AVE.	Address	259 NE HERNANDO AVE.	
City-State-Zip:	LAKE CITY FL 32055	City-State-Zip:	LAKE CITY FL 32055	
Title	TREASURER	Title	DIRECTOR	
Name	COX, STANLEY	Name	WILLIAMS, CHRIS	
Address	259 NE HERNANDO AVE.	Address	259 NE HERNANDO AVE.	
City-State-Zip:	LAKE CITY FL 32055	City-State-Zip:	LAKE CITY FL 32055	
Title	SECRETARY	Title	DIRECTOR	
Name	WILLIAMS, RENEE	Name	WITT, STEVE	
Address	259 NE HERNANDO AVE.	Address	259 NE HERNANDO AVE.	
City-State-Zip:	LAKE CITY FL 32055	City-State-Zip:	LAKE CITY FL 32055	

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: STANLEY COX

TREASURER

04/14/2023

Date

# FILED Apr 14, 2023 Secretary of State 7456777667CC

Electronic Signature of Signing Officer/Director Detail