

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000015

Entity Name: ARCADIA LODGE, NUMBER 1524, BENEVOLENT AND PROTECTIVE ORDER OF ELKS OF THE UNITED STATES OF AMERICA, INC.**FILED**
Apr 10, 2014
Secretary of State
CC5150925957**Current Principal Place of Business:**1028 WEST OAK STREET
ARCADIA, FL 34266**Current Mailing Address:**1028 WEST OAK STREET
ARCADIA, FL 34266**FEI Number: 65-0478967****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HIGGINBOTHAM, NANCY
1028 W. OAK STREET
ARCADIA, FL 34266 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title D
Name BLOCKER, BILL
Address 1028 WEST OAK STREET
City-State-Zip: ARCADIA FL 34266Title T
Name DURRANCE, KEVIN
Address 1028 W OAK STREET
City-State-Zip: ARCADIA FL 34266Title D
Name KEENE, KEITH
Address 1028 W. OAK STREET
City-State-Zip: ARCADIA FL 34266Title D
Name WILSON, LOUIS
Address 1028 WEST OAK STREET
City-State-Zip: ARCADIA FL 34266Title S
Name HIGGINBOTHAM, NANCY
Address 1028 W. OAK STREET
City-State-Zip: ARCADIA FL 34266Title D
Name BURNS, BRIAN T
Address 3662 N.W. CNTY RD. 661
City-State-Zip: ARCADIA FL

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: NANCY HIGGINBOTHAM**SECRETARY****04/10/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date