

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90012 023 ****61.25

DOCUMENT # 713261

1. Entity Name

HALLANDALE MOOSE LODGE NO 668, LOYAL ORDER OF MOOSE, INCORPORATED

Principal Place of Business

Mailing Address

920-24 S.W. 11TH ST.
 HALLANDALE FL 33009-6822
 US

920-24 S.W. 11TH ST.
 HALLANDALE FL 33009-6822

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1571805

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES INC.
3953 WW KELLEY ROAD
TALLAHASSEE FL 32311

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
 NAME **TD**
 STREET ADDRESS **LIS, JOHN**
 CITY-ST-ZIP **601 SW 2ND ST**
HALLANDALE FL 33009

TITLE ☒ Change ☐ Addition
 NAME **TD**
 STREET ADDRESS **Hummer, kristopher**
 CITY-ST-ZIP **7441 N.W. 12th St.**
Fort Lauderdale, FL 33313

TITLE ☐ Delete
 NAME **GD**
 STREET ADDRESS **COYLE, PAUL**
 CITY-ST-ZIP **7441 NW 12 ST**
FORT LAUDERDALE FL 33313

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **SD**
 STREET ADDRESS **TORNER, DAVID**
 CITY-ST-ZIP **3304 SW 50 RD**
FORT LAUDERDALE FL 33314

TITLE ☒ Change ☐ Addition
 NAME **SD**
 STREET ADDRESS **Bowman, Terry**
 CITY-ST-ZIP **610 S.W. 11th AV.**
HALLANDALE, FL 33009

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Terry Bowman **REQUIRED** Terry Bowman 01/10/02 (954) 456-8719

CR2E037 (9/01)