

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90153 032 ****61.25

DOCUMENT # 713261

1. Entity Name
HALLANDALE MOOSE LODGE NO 668, LOYAL ORDER OF MOOSE, INCORPORATED



Principal Place of Business
920-24 S.W. 11TH ST.
HALLANDALE FL 33009-6822
US

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

70002068



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1571805

Applied For

Not Applicable

Zip

Country

Zip

Country

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **G.D.** ☒ Change ☐ Addition
NAME **FRIEDERS, Scott A.**
STREET ADDRESS **241 S.W. 9th AVE**
CITY-ST-ZIP **HALLANDALE, Florida 33009**

TITLE **TD** ☒ Delete
NAME **HUMMER, CHRISTOPHER**
STREET ADDRESS **741 NW 12 STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33313**

TITLE **TD** ☒ Change ☐ Addition
NAME **BOSSI SA, JAMES P.**
STREET ADDRESS **401 N.E. 14th AVE apt. 807**
CITY-ST-ZIP **HALLANDALE, Florida 33009**

TITLE **SD** ☐ Delete
NAME **BOWMAN, TERRY**
STREET ADDRESS **610SW 11 AVENUE**
CITY-ST-ZIP **HALLANDALE FL 33009**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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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.

CR2E037 (10/02)

SIGNATURE: Terry Bowman **REQUIRE** Terry Bowman 01/04/03 (954)456-8719