2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State
03-07-2002 90019 001 ****70.00

DOCUMENT # 722689

1. Entity Name

DAVIE LODGE NO. 1798, LOYAL ORDER OF MOOSE, INC.

Principal Place of Business	Mailing Address
4483 SW 64TH AVE DAVIE FL 33314 US	~~PO BOX 292040~~ ~~DAVIE FL 33329-2040~~ ~~US~~ SAME

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	4483 SW 64th Ave Suite, Apt. #, etc.
City & State	City & State: DAVIE, FL
Zip / Country	Zip: 33314 / Country: US

4. FEI Number 59-1397971 ☐ 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D DALRYMPLE, WILLIAM C 6120 SW 39TH STREET DAVIE FL 33314	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ADMINISTRATOR ROBERT MCFADDEN 2050 N. MIAMI AVE MIAMI, FL. 33169	D	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAROCCA, ANTHONY CHARLE 3661 SW 60TH AVE DAVIE FL 33314	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GOVERNOR CURTIS HOWELL 5290 SW 35th ST. DAVIE, FL. 33314	D	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FARINA, TIMONTHY J 136 S.W. 127TH AVENUE PLANTATION FL 33325	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER JACK MIZE 1481 SW 67th Terr DAVIE, FL. 33314	D	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP			☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP			☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP			☐ Change ☐ Addition

CR2E037 (9/01)

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: Robert McFadden ROBERT MCFADDEN 2/18/02 954-584-1899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #