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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 723908 (0)

1. Corporation Name
LEHIGH ACRES LODGE NO. 2266 LOYAL ORDER OF MOOSE, INC.

Principal Place of Business Mailing Address
**210 HOMESTEAD ROAD
LEHIGH ACRES FL 33906**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/19/1972** 3a. Date of Last Report **03/18/1994**
4. FEI Number **23-7520375** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1201 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SD	NAME KERNER, CARL F. STREET ADDRESS 1313 ROOSEVELT DR CITY-ST-ZIP LEHIGH ACRES FL 33936	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE PG	NAME CORNWELL, ROSCOE STREET ADDRESS 210 JEFFERSON AVE CITY-ST-ZIP LEHIGH ACRES FL	2.1 TITLE PG (PART GOVERNOR) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME CASPERSEN, FAY STREET ADDRESS 1000 E. PENN ST CITY-ST-ZIP LEHIGH ACRES PL. 33936
TITLE TD	NAME BEDDICK, JOHN STREET ADDRESS 315 POINSETTIA AVE CITY-ST-ZIP LEHIGH ACRES FL	3.1 TITLE TD (GOVERNOR) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME GONCI, DOMINIC P. STREET ADDRESS 147 PEERLESS ST. CITY-ST-ZIP LEHIGH ACRES PL. 33970
TITLE P	NAME SHORT, JOHN STREET ADDRESS 472 VALLEY AVE CITY-ST-ZIP LEHIGH ACRES FL	4.1 TITLE P (GOVERNOR) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME TIAFENO STREET ADDRESS 1 HEATHASTOR LA CITY-ST-ZIP LEHIGH ACRES PL 33936
TITLE GD	NAME CASPERSEN, FAY STREET ADDRESS 1000 E. PENN ST CITY-ST-ZIP LEHIGH ACRES FL	5.1 TITLE GD (IN GOVERNOR) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME GARLOW, RONALD STREET ADDRESS 327 OLTIO RD. CITY-ST-ZIP LEHIGH ACRES, PL. 33936
TITLE D	NAME HOPPER, HENRY STREET ADDRESS 311 DARTMOUTH AVE CITY-ST-ZIP LEHIGH ACRES FL	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statute. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **CARL F. KERNER, JR.** *Carl Kerner* 4-11-95 368-2266
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #