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

Mailing Address

## **DOCUMENT # 723908**

1. Entity Name

LEHIGH ACRES LODGE NO. 2266 LOYAL ORDER OF MOOSE



**FILED** Jan 08, 2003 8:00 am Secretary of State 01-08-2003 90091 035 \*\*\*\*61.25

Principal Place 210 HOMESTEA LEHIGH ACRES	D ROAD	Mailing Address 210 HOMESTEAD ROAD LEHIGH ACRES FL 33936						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Псь	☐ CHECK HERE IF MAKING CHANGES			
Suite, Apt. #, etc.								
City & State		City & State		4. FEI Number 23-	4. FEI Number 23-7520375 Applied For Not Applicable			
Zip	Country	Zip	Country :	5. Certificate of Stat		8.75 Addit ee Required	ional	
	6. Name and Address of Current	Registered Agent		7. Name and Addre	ess of New Registered A	gent		
-			Name	Name				
	CUMENT SERVICES INC.		Street A	dress (P.O. Box Number is Not Acceptable)				
	KELLEY ROAD							
IALLAHA	SSEE FL 32301		0:4			Zip Code		
			City		FL			
8. The above the obligati	named entity submits this statement for ons of registered agent.	or the purpose of changing its r	registered office or	registered agent, or both, in the	e State of Florida. I am fa	amiliar with, a	nd accept	
SIGNATURE .								
SIGNATURE -	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	: Registered Agent signat	ure required when reinstating)	DATE			
			opaign Financing ontribution.	\$5.00 May Be Added to Fees	Make Check Florida Depart	tment of S	tate	
10.	OFFICERS AND DI		11.		S TO OFFICERS AND DIF		Addition	
TITLE	PD CARL F	🔀 Delete	TITLE	PD TOHN H. SMIT	TH .	☐ Change	M Addition	
NAME STREET ADDRESS	KERNER, CARL F. 1313 ROOSEVELT DR		NAME STREET ADDRESS	150 CARLISLE	4 r c	,		
CITY-ST-ZIP	LEHIGH ACRES FL 33936		CITY-ST-ZIP	LEHICH ACRES	, FL 33934	<u>م</u>		
TITLE	SD	<b>☑</b> Delete	TITLE	l αΛ		☐ Change	<b>⊠</b> Addition	
NAME	RODGERS, LEO	,	NAME	DREXELL M. 1	NIX, 3K		1	
STREET ADDRESS	721 POINSOMIA AVE	•	STREET ADDRESS	LENICH ACRES	El 83972	-3210		
CITY-ST-ZIP	LEHIGH ACRES FL 33936		CITY-ST-ZIP	LENIGH HEKES	JPE 33312	☐ Change	Addition	
TITLE	TR	🔀 Delete	TITLE	TO HENRY HOPPE	R	Change	ZACCILION	
NAME	HAMILTON, HOWARD D 564 EMPIRE AVE S		NAME STREET ADDRESS	DARTMOUT	74 17 V C			
STREET ADDRESS CITY-ST-ZIP	LEHIGH ACRES FL 33936		CITY-ST-ZIP	LEHIGH ACRES	5, FL 33936	-5003		
TITLE	T	<b>∑</b> Delete	TITLE			Change	Addition	
NAME	JOHNSON, TERRY		NAME	LEO RODGER	5		İ	
STREET ADDRESS	1022 MICHAEL AVE		STREET ADDRESS	721 POINSETTI	M AVE	_		
CITY-ST-ZIP	LEHIGH ACRES FL 33972		CITY-ST-ZIP	LEHIGH ACRES	5, FL 33336			
TITLE	T	🔽 Delete	TITLE	D F KERN	VER	Change	<b>™</b> Addition	
NAME	CARNWELL, ROSCOE		NAME	ALA A AACE UE I	7 0 K			
STREET ADDRESS	210 JEFFERSON DR		STREET ADDRESS CITY-ST-ZIP	IENICH APE	ES FL 33	972		
CITY-ST-ZIP	LEHIGH ACRES FL 33936	<b>⊠.</b> Delete	TITLE	T-		Change	Addition	
TITLE	HOPPER, HENRY	Neiete	NAME	304N J. 404	1K	_ ,	-	
NAME STREET ADDRESS	311 DRTMOUTH RD		STREET ADDRESS	874 SENTINE	LLA ALVD	و ر		
CITY-ST-ZIP	LEHIGH ACRES FL		CITY-ST-ZIP	LEHIGH ACK TOHN J. HOY 874 SENTINE LEHIGH ACKES	FL 33936-	-1126		
	1				/ n			

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 suppowered 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:** 

REXELL M. NIX, SR