

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB 21 AM 9:45

DOCUMENT # 724213 (4)

1. Corporation Name

ZEPHYRHILLS LODGE NO.2276, LOYAL ORDER OF MOOSE, INC

Principal Place of Business

Mailing Address

3211 GALL BLVD.  
ZEPHYRHILLS FL 33541-6879

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ZEPHYRHILLS FL 33541-6879

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

08/28/1972

03/28/1994

4. FEI Number

Applied For

59-1406036

Not Applicable

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 Zip Country

29 Zip Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 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 constituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME DILLINGHAM, HERBERT  
STREET ADDRESS 39103 BAY AVE  
CITY - ST - ZIP ZEPHYRHILLS FL

1.1 TITLE PRESIDENT  
1.2 NAME KRIBNHAGEN, LEE  
1.3 STREET ADDRESS 37647 CHANCEY RD. LOT 127  
1.4 CITY - ST - ZIP ZEPHYRHILLS, FL 33541

TITLE S  
NAME KNOWLES, JOHN  
STREET ADDRESS 4923 17TH ST.  
CITY - ST - ZIP ZEPHYRHILLS FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

TITLE V  
NAME HARTWELL, DONALD  
STREET ADDRESS 4638 WISTERIA DRIVE  
CITY - ST - ZIP ZEPHYRHILLS FL

3.1 TITLE VICE PRESIDENT  
3.2 NAME KEEFE, DAVID  
3.3 STREET ADDRESS 35137 MCCULLOUGH'S LEAP  
3.4 CITY - ST - ZIP ZEPHYRHILLS, FL 33541

TITLE D  
NAME QUICK, WILLIE  
STREET ADDRESS 37821 HART CIRCLE  
CITY - ST - ZIP ZEPHYRHILLS FL

4.1 TITLE DIRECTOR  
4.2 NAME HANSON, EUGENE  
4.3 STREET ADDRESS 37647 CHANCEY RD LOT 220  
4.4 CITY - ST - ZIP ZEPHYRHILLS, FL 33541

TITLE D  
NAME BREEDS, LAWRENCE  
STREET ADDRESS 8425 HEATHER DRIVE  
CITY - ST - ZIP ZEPHYRHILLS FL

5.1 TITLE DIRECTOR  
5.2 NAME CHELMEY, DONALD  
5.3 STREET ADDRESS 37930 SAGO PALM DRIVE  
5.4 CITY - ST - ZIP ZEPHYRHILLS, FL 33541

TITLE D  
NAME KEEFE, DAVID  
STREET ADDRESS 35137 MCCULLOUGH'S LEAP  
CITY - ST - ZIP ZEPHYRHILLS FL

6.1 TITLE DIRECTOR  
6.2 NAME BUSH, GENE  
6.3 STREET ADDRESS 39209 7th AVE  
6.4 CITY - ST - ZIP ZEPHYRHILLS, FL 33540

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 110.07(3)(b), Florida Statutes, 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:

JOHN KNOWLES  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/16/95 (813) 782-1771  
DATE