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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

724213

(4)

ZEPHYRHILLS LODGE NO.2276, LOYAL ORDER OF MOOSE,

INC Principal Place of Business Mailing Address 3211 GALL BLVD 3211 GALL BLVD. ZEPHYRHILLS FL 33541-6879 ZEPHYRHILLS FL 33541-6879 3. Date Incorporated or Qualified 3a. Date of Last Report 02/21/1995 08/28/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1406036 21 26 Not Applicable Suite. Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 83 84 City Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, 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 617,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and time if applicable (NC)TE. Registered Agent signature required when reinstating: 12 OFFICERS AND DIRECTORS 13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 TITLE Change Addition KRIENHAGEN, LEE NAME 1.2 NAME CR2E037 37647 CHANCEY ROAD LOT 127 STREET ADDRESS 1.3 STREET ADDRESS ZEPHYRHILLS FL CITY - ST - ZIP 1.4 C(1) Y - ST - Z(P TITLE DELETE 2.1 TIFLE Administrator Change DE Add KNOWLES, JOHN NAME 2.2 NAME David K. Flood 4923 17TH ST. STREET ADDRESS. 38324 127 AVE 2.3 STREET ADDRESS ZEPHYRHILLS FL CITY-\$1-7IP 2 4 CITY - ST - ZIP Zephyrhills FL 33540 THUE **DE**DELETE 31 TITLE Change KEEFE, DAVID Willie + quick NAME 3.2 NAME 35137 MCCULLOUGH'S LEAP STREET ADDRESS POBOX 1044 (MA) 3.3 STREET ADDRESS ZEPHYRHILLS FL Zephyrhills FL 33539 CITY-S1-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change Addition HENSON, EUGENE NAME 4 2 NAME 37647 CHANCEY ROAD LOT 220 STREET ADDRESS 4.3 STREET ADDRESS ZEPHYRHILLS FL CITY-ST-ZIP 4.4 CITY - ST - ZIP THE DELETE 5 1 TITLE Jerome MONK (D) Change Addition CHELMEY, DONALD NAME 5.2 NAME 36814 teresa Rd 37930 SAGO PALM DRIVE STREET ADORESS 5.3 STREET ADDRESS DAdecity ZEPHYRHILLS FL 33525 CITY-ST-ZIP 5 4 CITY - ST - ZIP THILE DELETE 6.1 TITLE (\mathbf{D}) Change ☐ Addition BUSH, GENE NAME 6.2 NAME Frank Perkins 39209 SEVENTH AVE 3611 Florida Fouch Blud STREET ADDRESS 6.3 STREET ADORESS ZEPHYRHILLS FL Zephyrhills EL 33541 CHT+-ST-ZIP 6 4 CITY - ST - 21P

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)(k). Florida Statutes. I further Tab hereby certify that the information supplied with this litting is voluntarily furnished and boes not quarry for the exemption istated in becard it is 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 frustee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: Date: Proper of Director Character Proper of Control Proper of C

(12/95)