


**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Feb 09 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 724213 (4)**

1. Corporation Name  
**ZEPHYRHILLS LODGE NO.2276, LOYAL ORDER OF MOOSE, INC**



Principal Place of Business <b>3211 GALL BLVD. ZEPHYRHILLS FL 33541-6879</b>	Mailing Address <b>3211 GALL BLVD. ZEPHYRHILLS FL 33541-6879</b>
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3. Date Incorporated or Qualified  
**08/28/1972**

4. FEI Number  
**59-1406036**

Applied For  
 Not Applicable

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

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. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

**01** Name  
**02** Street Address (P.O. Box Number is Not Acceptable)  
**03**  
**04** City  
**FL** **05** 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<b>P</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CHEMLEY, DONALD E</b>	1.2 NAME	<b>MONK, JEROME</b>
STREET ADDRESS	<b>5302 ASTRID DR</b>	1.3 STREET ADDRESS	<b>36814 TERESA RD</b>
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	1.4 CITY-ST-ZIP	<b>DADE CITY, FL 33523</b>
TITLE	<b>SA</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<b>SA</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>FLOOD, DAVID K</b>	2.2 NAME	<b>DOWNEY, KENNETH.</b>
STREET ADDRESS	<b>38324 12THA VE</b>	2.3 STREET ADDRESS	<b>3224 BLUE LAGOON DR</b>
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	2.4 CITY-ST-ZIP	<b>ZEPHYRHILLS, FL 33541</b>
TITLE	<b>T</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<b>T</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BREEDS, LAWRENCE R</b>	3.2 NAME	<b>STRAHAN, EARL</b>
STREET ADDRESS	<b>8425 HEATHER DRIVE</b>	3.3 STREET ADDRESS	<b>4936 LAMAR RD</b>
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	3.4 CITY-ST-ZIP	<b>ZEPHYRHILLS, FL. 33541</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HENSON, EUGENE</b>	4.2 NAME	<b>BIHLER, HARRY</b>
STREET ADDRESS	<b>37647 CHANCEY ROAD LOT 220</b>	4.3 STREET ADDRESS	<b>6305 N. FLETCHER RD</b>
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	4.4 CITY-ST-ZIP	<b>PLANT CITY, FL 33565</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<b>DOGOL</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MONK, JEROME</b>	5.2 NAME	<b>GOLDENSOPH, JEFFREY</b>
STREET ADDRESS	<b>36814 TERESA RD</b>	5.3 STREET ADDRESS	<b>36834 COLEMAN AVE</b>
CITY-ST-ZIP	<b>DADE CITY FL</b>	5.4 CITY-ST-ZIP	<b>DADE CITY, FL. 33525</b>
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LEE, DONALD</b>	6.2 NAME	<b>FRANKLIN, CHARLES</b>
STREET ADDRESS	<b>3116 BLUE LAGOON DR</b>	6.3 STREET ADDRESS	<b>7412 FORBES ROAD</b>
CITY-ST-ZIP	<b>ZEPHYRHILLS FL</b>	6.4 CITY-ST-ZIP	<b>ZEPHYRHILLS, FL 33540</b>

14. 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 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: *Kenneth Downey* **1-29-98 (813) 782-1221**

CR2E037 (10/97)