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02-22-1999 90147 036 ATT*61.25
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # 727218
1. Corporation Name
ARCADIA LODGE NO. 1327, LOYAL ORDER OF MOOSE, IN C.

Principal Place of Business: 1121 W. OAK ST. ARCADIA FL 34266
Mailing Address: 1121 W. OAK ST. ARCADIA FL 34266

21. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 08/21/1973
22. Suite, Apt. #, etc.	2b. Suite, Apt. #, etc.	4. FEI Number 23-7185233
23. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
25. Country	29. Country	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent: ANDEL, ANDY, 4597 NW HIGHLAND ST. ARCADIA FL 34266

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

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: _____ DATE: _____
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	A	1.1 TITLE	HAROLD WILLIAMS
NAME	ANDEL, ANDY	1.2 NAME	2346 NW HOWARD AVE
STREET ADDRESS	4597 NW HIGHLAND ST.	1.3 STREET ADDRESS	ARCADIA FLORIDA 34266
CITY-ST-ZIP	ARCADIA FL	1.4 CITY-ST-ZIP	
TITLE	JRG	2.1 TITLE	
NAME	WHITE, ED	2.2 NAME	
STREET ADDRESS	6874 SW MIAMI AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ARCADIA FL 34266	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	
NAME	GRORGES, RICK SR	3.2 NAME	
STREET ADDRESS	63 RIO VISTA DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	ARCADIA FL 34266	3.4 CITY-ST-ZIP	
TITLE	G	4.1 TITLE	PAST GOVERNOR
NAME	BEVENS, EARL E.	4.2 NAME	EARL E. BEVENS
STREET ADDRESS	5782 NE HIGHWAY 17 LOT C10A	4.3 STREET ADDRESS	5792 NE HWY 17 LOT C10A
CITY-ST-ZIP	ARCADIA FL	4.4 CITY-ST-ZIP	ARCADIA FL 34266
TITLE	T	5.1 TITLE	GOVERNOR
NAME	YUSKO, STEVE	5.2 NAME	STEVE YUSKO
STREET ADDRESS	5905 NE HWY 17, LOT 299	5.3 STREET ADDRESS	5905 NE HWY 17 LOT 299
CITY-ST-ZIP	ARCADIA FL 34266	5.4 CITY-ST-ZIP	ARCADIA, FL 34266
TITLE	TR	6.1 TITLE	
NAME	HILL, RICHARD	6.2 NAME	
STREET ADDRESS	262 HIGHWAY 70 LOT 356	6.3 STREET ADDRESS	
CITY-ST-ZIP	ARCADIA FL	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(j), 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 with all other like empowered.

SIGNATURE: _____ DATE: 02-22-99 90147 036 \$61.25
1-5-99 94-494-4882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Note

CR2E037 (1/98)