


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Jan 26, 2005 8:00 am**  
**Secretary of State**

01-26-2005 90001 012 \*\*\*\*61.25

<b>DOCUMENT # 727218</b>			
1. Entity Name ARCADIA LODGE NO. 1327, LOYAL ORDER OF MOOSE, INC.			
Principal Place of Business 1121 W. OAK ST. ARCADIA FL 34266		Mailing Address 1121 W. OAK ST. ARCADIA FL 34266	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324</b>		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE Registered Agent signature required when reinstating) DATE _____			
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A ANDEL, ANDY 4597 NW HIGH LAND ST ARCADIA FL 34266 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	A. GUY CRITES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3402 SE MONTGOMERY CIR ARCADIA FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	G CRITES, GUY 3402 SE MONTGOMERY CIR ARCADIA FL 34266 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	G. DARRIN HALSEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4598 NW HIGH LAND ST. ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARMEL, PERRY 4810 NW HWY 72 #86 ARCADIA FL 34266 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. RON BLAIR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1177 SE 7th Ave. ARCADIA, FL 34266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KREBS, WILLIAM 11751 SE HEAD AVE ARCADIA FL 34266 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	I BELVINS, EARL 2302 SE RED BARRON RD ARCADIA FL 34266 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JG HALSEX, DARRIN 4598 NW HIGH HAND STREET ARCADIA FL 34266 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HECTOR HERRA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3461 SE BROWN RD. ARCADIA, FL 34266

40006327



1st MOORE CR2E037 (10/04)

4. FEI Number 23-7185233 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

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 empowered 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 Guy Crites GUY CRITES 1/22/05 863-494 4882  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #