

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727218

FILED
Jan 13, 2009
Secretary of State

Entity Name: ARCADIA LODGE NO. 1327, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

1121 W. OAK ST.
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

1121 W. OAK ST.
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 23-7185233 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: A () Delete
Name: GAUSE, CARL
Address: 4810 NW HWY 72 #215
City-St-Zip: ARCADIA, FL 34266

Title: P () Delete
Name: HERRERA, HECTOR
Address: 1121 WEST OAK ST
City-St-Zip: ARCADIA, FL 34266

Title: P () Delete
Name: SCHUIDT, HOWARD
Address: PO BOX 531
City-St-Zip: ARCADIA, FL 34265

Title: T () Delete
Name: CARMEL, PENNY
Address: 4810 NW HWY 72TH 86
City-St-Zip: ARCADIA, FL 34266

Title: T () Delete
Name: KAZIOL, PAUL
Address: 4810 NW HWY 72TH 86
City-St-Zip: ARCADIA, FL 34266

Title: T () Delete
Name: HERRA, HECTOR
Address: 9461 SE BROWN RD.
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL B GAUSE

Electronic Signature of Signing Officer or Director

ADMI

01/13/2009

_____ Date