

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 729563

FILED
Dec 13, 2005
Secretary of State

Entity Name: LARGO MOOSE LODGE NO. 2205 LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

11616 87TH STREET NORTH
LARGO, FL 337734905 US

New Principal Place of Business:

Current Mailing Address:

11616 87TH STREET NORTH
LARGO, FL 337734905 US

New Mailing Address:

FEI Number: 23-7327002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: T.SHELDON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEARKPP, JR, JOHN G
Address: 558 6TH AVENUE SOUTH
City-St-Zip: LARGO, FL 337712136

Title: PD () Delete
Name: TITUS, WARREN A
Address: 8160 83RD
City-St-Zip: LARGO, FL 337773629

Title: MSD () Delete
Name: SHELDON, THOMAS H
Address: P.O. BOX 530415
City-St-Zip: ST. PETERSBURG, FL 33747

Title: T () Delete
Name: MICHAUD, LOU
Address: 12100 SEMINOLE BLVD LOT 132
City-St-Zip: LARGO, FL 337782818

Title: D () Delete
Name: BAELAG, JAMES
Address: 9790 66TH ST
City-St-Zip: PINELLAS PARK, FL 33782

Title: D () Delete
Name: DRAYAN, JAMES J
Address: 2098 SEMINOLE BLVD #12
City-St-Zip: LARGO, FL 33778

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
Name:
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 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 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: THOMAS SHELDON

Electronic Signature of Signing Officer or Director

MSD

12/13/2005

Date