2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Oct 08, 2009 **DOCUMENT#729563** Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

11616 87TH STREET NORTH LARGO, FL 337734905 US

Current Mailing Address: New Mailing Address:

11616 87TH STREET NORTH LARGO, FL 337734905 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete KNIGHT, HANS GOVERNO GILLEY, KEN GOVERNO Name: Name:

11616 87TH ST N Address: 11616 87TH ST N Address: LARGO, FL 33773 City-St-Zip: City-St-Zip: LARGO, FL 33773

Title: PD Title: () Delete () Change () Addition

DEMYAN, JAMES PASTGOV Name: Name: Address: 11616 87TH ST N Address: City-St-Zip: LARGO, FL 33773 City-St-Zip:

Title: MSD () Delete Title: () Change () Addition

DALE, DAVID C ADMINIS Name: Name: Address: 11616 87 TH ST N Address: City-St-Zip: LARGO, FL 333773 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: LEVEROCK, MERVIN JR.GOV Name: Address: 11616 87TH ST N Address: City-St-Zip: LARGO, FL 33773 City-St-Zip:

Title: () Delete Title: () Change () Addition

MOORHOUSE, JOSEPH PRELATE Name: Name: 11616 87TH ST N Address: Address: City-St-Zip: LARGO, FL 33773 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

LYNCH, JOHN TREASUR MICHAUD, LOU TREASUR Name: Name: Address: 11616 87TH ST N Address: 11616 87TH ST N LARGO, FL 33773 LARGO, FL 33773 City-St-Zip: 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: DAVID C DALE MSD 10/08/2009