

FILE NOW: FILING FEE IS \$61.25.

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748527 (9)

1. Corporation Name

FT. MYERS LODGE #1899 LOYAL ORDER OF MOOSE,
INC

Principal Place of Business

Mailing Address

P.O. Box 07219
Ft Myers, FL
33919

3. Date Incorporated or Qualified

08/14/1979

3a. Date of Last Report

04/18/1995

2. Principal Place of Business

2a. Mailing Address

P.O. Box 07219
Ft Myers, FL 33909

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

TITLE ☒ DELETE

NAME GD MORGAN JODY P.
STREET ADDRESS 1829 GRACE AVE
CITY-ST-ZIP FT MYERS FL 33901

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

GD O'LOUGHLIN, MARK E
1330 N.E. 7th AVE
CAPE CORAL, FL 33909

☒ Change ☐ Addition

TITLE ☒ DELETE

NAME PG NULL, LARRY D
STREET ADDRESS 4368 TUFTS AVE
CITY-ST-ZIP FT MYERS FL 33901

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

PG MORGAN Jody P.
1829 GRACE AVE
FT MYERS FL 33901

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME AD MAKI, Wilbert R
STREET ADDRESS 233 OSPREY
CITY-ST-ZIP FT MYERS BEACH, FL 33932

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

300001783913
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☐ Change ☐ Addition

TITLE ☒ DELETE

NAME JG O'LOUGHLIN, MARK E
STREET ADDRESS 931 NE 23rd TERRACE
CITY-ST-ZIP CAPE CORAL, FL 33909

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

JG BLAIR, William A.
15210 MEADOW Circle
Ft Myers, FL 33908

☐ Change ☒ Addition

TITLE ☒ DELETE

NAME D DISATELL, EDWARD N
STREET ADDRESS 5848 HARBOR CLUB RD
CITY-ST-ZIP FT MYERS, FL 33919

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Prelate
Disotell, Edward N
5848 HARBOR CLUB RD
Ft Myers FL 33919

☒ Change ☐ Addition

TITLE ☐ DELETE

NAME T GORHAM, JAMES E
STREET ADDRESS 2845 MEADOW LANE
CITY-ST-ZIP FT MYERS, FL 33901

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

T DEMARCO, PASQUALE
2113 GORHAM AVE
Ft Myers, FL 33907

☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Wilbert R. Maki, *Wilbert R. Maki*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 10, 1996
Date

1-941-437-3161
Daytime Phone #

CR2E037 (12/95)