

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46621

1. Entity Name

CALOOSA HATCHEE LODGE NO. 2395, LOYAL ORDER OF MO

Principal Place of Business

419 E. CAPE CORAL PKWY  
CAPE CORAL FL 33904  
US

Mailing Address

419 E. CAPE CORAL PKWY  
CAPE CORAL FL 33904-8540  
US

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

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES INC.  
3953 WW KELLEY ROAD  
TALLAHASSEE FL 32301

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☒ Delete  
NAME BALL, CHARLES A  
STREET ADDRESS 419 E CAPE CORAL PKWY  
CITY-ST-ZIP CAPE CORAL FL 33904-8540

TITLE MD, ☐ Change ☒ Addition  
NAME EDWARD W. NOLDER  
STREET ADDRESS 419 CAPE CORAL PKWY E  
CITY-ST-ZIP CAPE CORAL, FL 33904-8540

TITLE VP ☒ Delete  
NAME SIDONIO, JOHN F  
STREET ADDRESS 4807 TUDOR DR  
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE PD ☐ Change ☒ Addition  
NAME THOMAS FIEBELKORN  
STREET ADDRESS 193 HIBISCUS WAY  
CITY-ST-ZIP N. FT. MYERS, FL 33903

TITLE TD ☒ Delete  
NAME KORWATCH, LARRY  
STREET ADDRESS 2616 ARCHER PKWY  
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE D ☐ Change ☒ Addition  
NAME PETER YANETTA  
STREET ADDRESS 4717 SE 4TH PLACE #3  
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE SD ☒ Delete  
NAME FOX, J.P.  
STREET ADDRESS 217 SE 40 STREET  
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE VP& ☐ Change ☒ Addition  
NAME MARK LABIENTO  
STREET ADDRESS 4928 VINCENNES ST. APT C-3  
CITY-ST-ZIP CAPE CORAL, FL 33904

TITLE D ☐ Delete  
NAME BERGAN, GEORGE J  
STREET ADDRESS 115 SW 52 STREET  
CITY-ST-ZIP CAPE CORAL FL 33914

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D Delete  
NAME PUTZ, VINCENT  
STREET ADDRESS P O BOX 1432 N/A  
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE TD ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

441-  
Apr 10, 2000 945-6006

FILED  
Apr 17, 2000 8:00 am  
Secretary of State

04-17-2000 90031 010 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0306216  
Applied For  
Not Applicable

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