

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90052 038 ****61.25

DOCUMENT # N46621

1. Entity Name

CALOOSAATCHEE LODGE NO. 2395, LOYAL ORDER OF MOOSE, INC.



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
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0306216

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	CRAWFORD, RICHARD A	
STREET ADDRESS	1322 SE 44TH TERRACE	
CITY-ST-ZIP	CAPE CORAL FL 33904	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BROWN, DONALD	
STREET ADDRESS	1846 POWELL DR. LOT 21	
CITY-ST-ZIP	NORTH FORT MYERS FL 33917	
TITLE	TD	<input type="checkbox"/> Delete
NAME	STOVER, JERRY	
STREET ADDRESS	104 NE 10TH AVE.	
CITY-ST-ZIP	CAPE CORAL FL 33909	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FIEBELKORN, THOMAS H	
STREET ADDRESS	16029 HIBISCUS WAY	
CITY-ST-ZIP	NORTH FORT MYERS FL 33903	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERGAN, GEORGE J	
STREET ADDRESS	115 SW 52 STREET	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE	D	<input type="checkbox"/> Delete
NAME	RIESTER, JACK	
STREET ADDRESS	427 SE 38TH TERR	
CITY-ST-ZIP	CAPE CORAL FL 33914	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIDONIO JOHN	
STREET ADDRESS	4803 SUNSET CT #102	
CITY-ST-ZIP	CAPE CORAL, FL. 33904	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIESTER, JACK	
STREET ADDRESS	427 SW 38TH TERR.	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRAWFORD, RICHARD	
STREET ADDRESS	1322 SE 44TH TERR.	
CITY-ST-ZIP	CAPE CORAL FL 33904	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLEISBERG, GEORGE	
STREET ADDRESS	4424 SW 14TH PLACE	
CITY-ST-ZIP	CAPE CORAL, FL 33914	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NATTANIA, CARL	
STREET ADDRESS	933 SW 37TH LANE	
CITY-ST-ZIP	CAPE CORAL, FL 33914	

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: *Richard Crawford*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-04 (239)945-6066
Date Daytime Phone #