

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 29 AM 7:17

DOCUMENT # N94000002811 (7)

1. Corporation Name

MANATEE MOOSE LEGION NO. 58, INC.

Principal Place of Business

Mailing Address

1278 MCNEIL ROAD
NO FT MYERS FL 33903

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NO FT MYERS FL 33903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1994

3a. Date of Last Report

6.19.94

4. FEI Number

59-1662487

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S 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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME DENISON, CARL
STREET ADDRESS 10278 SW JUDY AVE
CITY-ST-ZIP ARCADIA FL 33821

11 TITLE PD
12 NAME CASADEI, ALFRED A.
13 STREET ADDRESS 137 Garcia Way
14 CITY-ST-ZIP Ft. Myers Beh., Fl. 33931-3410

TITLE VD
NAME CASADEI, ALFRED A
STREET ADDRESS 137 GARCIA WAY
CITY-ST-ZIP FT MYERS BEACH FL 33931

21 TITLE VD
22 NAME GODDARD, EVERETT J.
23 STREET ADDRESS 3460 3rd Ave.
24 CITY-ST-ZIP Naples, Fl. 33964-2720

TITLE SD
NAME WILDIN, ROBERT F
STREET ADDRESS 1278 MCNEIL ROAD
CITY-ST-ZIP NO FT MYERS FL 33903

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE TD
NAME FISCHER, ED
STREET ADDRESS 3108 SURFSIDE BLVD
CITY-ST-ZIP NAPLES FL 33916

41 TITLE TD
42 NAME MARR, ROSSI
43 STREET ADDRESS 4350 13th Ave.
44 CITY-ST-ZIP Naples, Fl. 33999

TITLE D
NAME GEE, WARREN
STREET ADDRESS 3833 EDGEWOOD AVE
CITY-ST-ZIP FT MYERS FL 33916

51 TITLE D
52 NAME DENISON, CARL R.
53 STREET ADDRESS 10268 S.W. Judy Ave.
54 CITY-ST-ZIP Arcadia, Fl. 33821

TITLE D
NAME GODDARD, EVERETT
STREET ADDRESS 3460 ERD AVE NW
CITY-ST-ZIP NAPLES FL 33916

61 TITLE D
62 NAME Inaogna, Nicholas A.
63 STREET ADDRESS 9865 Spyglass Ct.
64 CITY-ST-ZIP No. Ft. Myers, Fl. 33903

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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 attached, or in an attachment with an address.

SIGNATURE: Robert F. Willin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Expiration Period

3/28/95

818.574.7757