



**FORT PIERCE MOOSE LODGE #248**  
 3505 KIRBY LOOP RD.  
 FORT PIERCE, FL, 34981

400002312824--8  
 -10/06/97--01122--022  
 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

City/State Phone  
**750713**

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. \_\_\_\_\_  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

- Walk in   
  Pick up time \_\_\_\_\_   
  Certified Copy  
 Mail out   
  Will wait   
 Photocopy   
 Certificate of Status

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 07 OCT -6 AM 10: 51

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS                          |  |
|-------------------------------------|--|
| <input type="checkbox"/>            | Amendment                              |
| <input type="checkbox"/>            | Resignation of R.A., Officer/ Director |
| <input checked="" type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/>            | Dissolution/Withdrawal                 |
| <input type="checkbox"/>            | Merger                                 |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION |                     |
|-----------------------------|---------------------|
| <input type="checkbox"/>    | Foreign             |
| <input type="checkbox"/>    | Limited Partnership |
| <input type="checkbox"/>    | Reinstatement       |
| <input type="checkbox"/>    | Trademark           |
| <input type="checkbox"/>    | Other               |

10-9-97

Examiner's Initials **CC**

Florida Department of State, Sandra B. Mortham, Secretary of State

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation is: FORT PIERCE LODGE # 248, LOYAL ORDER OF MOOSE
- 2. The mailing address of the corporation is: 3505 KIRBY LOOM RD.  
FORT PIERCE FL 34981
- 3. Date of incorporation/qualification: Dec 15 / 79 Document number: 750713
- 4. The name and address of the current registered agent and office:

ROBERT HORN  
8021 OKEECHOBEE RD.  
FT. PIERCE, FL 34945

- 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

ROY YOUNG  
1207 SOLTMAN AV.  
FORT PIERCE, FL 34950

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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

James F. Anderson  
 (Signature of an officer, chairman or vice chairman of the board)

Sept. 24, 1997  
 (Date)

JAMES F. ANDERSON  
 (Printed or typed name and title)

SEPT. 24, 1997  
 (Date)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]  
 (Signature of Registered Agent)

Sept 24/97  
 (Date)

If signing on behalf of an entity:

ROY YOUNG  
 (Typed or Printed Name)

ADMINISTRATOR  
 (Capacity)

CR2E045(4/95)

RECEIVED

FILING FEE: \$35.00

SEP 25 1997

D.A.B.T.  
FT. PIERCE, FLORIDA