

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 # 735245 (3)

1. Corporation Name

ORLANDO LODGE NO. 766 LOYAL ORDER OF MOOSE, INC.



Principal Place of Business

5001 N. ORANGE BLOSSOM TRL.
ORLANDO FL 32810

Mailing Address

5001 N. ORANGE BLOSSOM TRL.
ORLANDO FL 32810

3. Date Incorporated or Qualified

03/12/1976

3a. Date of Last Report

04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-0338210

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T 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

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	PAYNE, OTMER R	
STREET ADDRESS	4514 LAVISTA DR	
CITY - ST - ZIP	ORLANDO FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	GODFREY, ERNEST J	
STREET ADDRESS	3073 FERNCREEK AVE	
CITY - ST - ZIP	ORLANDO FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	HERMAN, KENNETH J.	
STREET ADDRESS	2800 EDGEWATER DRIVE	
CITY - ST - ZIP	ORLANDO FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DAVIS, CHESTER A	
STREET ADDRESS	1108 VENETIAN AVE	
CITY - ST - ZIP	ORLANDO FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	HAMMOND, DONALD G	
STREET ADDRESS	5001 N ORANGE BLOSSOM TR	
CITY - ST - ZIP	ORLANDO FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	GAY, RAYMOND	
STREET ADDRESS	3000 CLARCONA RD. #2618	
CITY - ST - ZIP	APOPKA FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Robert Larry Segrest	
13 STREET ADDRESS	5522-A Cinderlane Parkway	
14 CITY - ST - ZIP	Orlando, Fl. 32808	
21 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Michael C. Monse	
23 STREET ADDRESS	6508 Pope Rd.	
24 CITY - ST - ZIP	Orlando, Fl. 32810-4062	
31 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	J. Roy Smith	
33 STREET ADDRESS	9816 Balmoral Circle	
34 CITY - ST - ZIP	Orlando, Fl. 32817-1831	
41 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	John R. Helton	
43 STREET ADDRESS	762 Jeffcoat St.	
44 CITY - ST - ZIP	Apopka, Fl. 32703-7210	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME	Gary C. Richards	
63 STREET ADDRESS	6556-B Centerwalk Dr.	
64 CITY - ST - ZIP	Winter Park, Fl. 32792	

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: Donald G. Hammond

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)