## 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 # N9400002811 (7)

MANATEE MOOSE LEGION NO. 58, INC.											
Principal Place of Business Mailing Address				··· ·· ·			1 1000/1101 010 PARFI 0/011 10/11 00/11				
1278 MCNEIL ROAD 1278 MCNEIL ROAD NO FT MYERS FL 33903 NO FT MYERS FL 3390			903	ı							
							3. Date Incorporated or Qualified 06/01/1994	3a. Date	of Last 3/29/1	•	
2. Principal Pl	2a. Mailing Address	ling Address				4. FEI Number Applied For					
21 26 Suite, Apt. #, etc. Suite, Ap			#				59-1662487			Not Applicable	
22		Suite, Apt. #, etc. 27				5. Certificate of Status Desired			Additional Required		
City & State	0	City & State				<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>					
Zip <b>24</b>	Country 25	30 Cou	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
	9. Name and Address of Current	Registered Agent				L.	10. Name and Address of New Ro	gistered Ag	ent		
1											
CT CORPORATION SYSTEM 1200 S PINE ISLAND ROAD				82	Street A	Address					
PLANTATION FL 33324				83							
10117	11011 1 2 00024			24	0:4						
				84	City			FL	<b>85</b> Ziç	p Code	
or register familiar wi	to the provisions of Sections 617.0502 red agent, or both, in the State of Florid th, and accept the obligations of, Section	a. Such chance was authoriz	zed by the c	ve-na corpo	amed cor pration's b	poratio poard o	on submits this statement for the purp of directors. I hereby accept the appo	oose of chang intment as re	ing its registered	egistered office agent. I am	
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title if applicable. (N/	DTE: Registered	Agent	signature red	aured wh	en reinstating)	DATE			
12.	OFFICERS AND		13.			4	ADDITIONS/CHANGES TO OFFI		RECTO	OHS IN 12	
TITLE	≥ VD	DELETE	1.1 7/1	TLE		PD			Change	Addition	
NAME	GODDARD, EVERETT J.		1.2 NA	ME	1	Godo	dard, Everett J.				
STREET ADDRESS	3460 3RD AVE	<b>\</b>	1.3 \$7	REET A			O 3rd Ave.				
CITY-ST-ZIP	NAPLES FL						les, Fl. 33964-2720				
THILE	PD	DELETE	2 1 TII	LE	- 1	D		R.	Change	Addition	
NAME	CASADEI, ALFRED A			2 2 NAME			scher, Edward				
STREET ADDRESS	137 GARCIA WAY						106 Surfside Blvd.				
CITY-ST-ZIP TITLE	FT MYERS BEACH FL		2.40			Cape Coral, Fl. 33914-3870					
NAME	SD (_ Wildin, Robert F		3.1 TiT		1		ld. Dahama D	K	Change	Addition	
STREET ADDRESS	1278 MCNEIL ROAD	Ì	3.2 NA		ADDRESS	1278	lin, Robert F. 8 McNeil Rd.				
CITY-ST-ZIP	NO FT MYERS FL 33903	\	3.4. Ci					903			
TITLE	TD	DELETE	4.1 TiT			D	100 10,020, 111 00		Change	Addition	
NAME	MARR, ROSSI		4. 2 N/			Hedi	rick, Paul	Light.	yr.co.igo		
STREET ADDRESS	4350 13 AVE	`					Berthoud St.				
CITY-ST-ZIP	NAPLES FL	. \	i i	TY-ST-				953-181	2		
TITLE	D	DELETE	5.1 T(T	LE		D		<b>Z</b>	Change	Addition	
NAME	DENISON, CARL R.	ŕ	5.2 NA	ME		Leon	nhardt, Robert				
STREET ADDRESS			5.3 ST	REET ADDRESS   141			9 Huntdale St. E.				
CITY-ST-ZIP	ARCADIA FL			IY-ST-	- ZIP	Leh:	igh Acres, Fl. 339	36-5824			
TITLE	D	DELETE 6.1		LE		D		K	Change	Addition	
NAME				ME		Insogna, Nicholas A.					
STREET ADDRESS	9865 SPYGLASS CT						5 Spyglass Ct.				
CITY-ST-ZIP	N FT MYERS FL	ith this files is not intent to	6.4 CIT	Y-ST-	-ZIP	NO.		903			
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 in changed, or on an attachment with an address.											

ROBERT P. WILLIN-SELY. 4.18.96 941-574.7751
NO OFFICER OR DIRECTOR
Dayling Priore V SIGNATURE: 🗡