

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

**FILED**  
**Aug 02, 2004 8:00 am**  
**Secretary of State**

08-02-2004 90021 008 \*\*\*\*61.25

**DOCUMENT # N94000002811**

1. Entity Name

MANATEE MOOSE LEGION NO. 58, INC.



Principal Place of Business

11 NE PINE ISLAND RD  
CAPE CORAL FL 33909-2559

Mailing Address

11 NE PINE ISLAND RD  
CAPE CORAL FL 33909-2559

2. Principal Place of Business

3. Mailing Address

17100 TAMIANI TRL #198

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Punta Gorda FL

Zip

Country

Zip

33955

Country

USA

4. FEI Number

59-1662487

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  
1200 S PINE ISLAND ROAD  
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 September 8, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME ELMORE, JEFFREY  
STREET ADDRESS 2503 APACHE STREET  
CITY-ST-ZIP SARASOTA FL 34231-5009

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME WILLIN, ROBERT F  
STREET ADDRESS 5698 INVERNESS CIR  
CITY-ST-ZIP N FT MYERS FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME BERGAU, GEORGE J  
STREET ADDRESS 115 SW 52ND STREET  
CITY-ST-ZIP CAPE CORAL FL 33914-7108

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME DEL CORSO, STEPHEN J  
STREET ADDRESS 28786 CARMEL WAY  
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☒ Delete  
NAME TERLUNEN, ROGER  
STREET ADDRESS 546 9TH AVE NORTH  
CITY-ST-ZIP NAPLES FL 34108

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME VINCENT PRINCIPAL  
STREET ADDRESS 30 HAWAII BLVD.  
CITY-ST-ZIP NAPLES FL 34112

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7.30.04

239.543.3576

Date

Daytime Phone #