Entity Name: ORLANDO LODGE NO. 766 LOYAL ORDER OF MOOSE, INC.
Current Principal Place of Business:

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

5001 N. ORANGE BLOSSOM TRL. ORLANDO, FL 32810

**DOCUMENT# 735245** 

## **Current Mailing Address:**

5001 N. ORANGE BLOSSOM TRL. ORLANDO, FL 32810

### FEI Number: 59-0338210

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

TATION, FL 33324 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

## Officer/Director Detail :

Onicendirec	to Detail.		
Title	D	Title	D
Name	GREEN, DONALD	Name	HOLTHUSEN, MATTHEW
Address	4360 S ORLANDO PKWY	Address	616 CARDINAL ST
City-State-Zip:	ORLANDO FL 32808	City-State-Zip:	OCOEE FL 34761
Title	S	Title	V
Name	ONEAL, DAN	Name	CHARLES, BENSON
Address	211 MARGARET RD	Address	1817 BLUFF OAK ST
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	APOPKA FL 32712
Title	Ρ	Title	т
Name	JEFFCOAT, JAMES	Name	CAIME, AL
Address	1326 KURAME CT	Address	800 RIO ALA MANO DR
City-State-Zip:	ORLANDO FL 32818	City-State-Zip:	ALTAMONTE SPRINGS FL 32714
<b>T</b> :0 -		Title	OFFICER
Title	OFFICER		
Name	RYAN, EDWARD	Name	MOWRY, SCOTT
Address	1213 DENSMORE DR	Address	PO BOX 608
City-State-Zip:	WINTER PARK FL 32792	City-State-Zip:	APOPKA FL 32704

# Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAN ONEAL

ADMINISTRATOR

04/11/2013 Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

FILED Apr 11, 2013 Secretary of State CC2812815723

Date

#### **Officer/Director Detail Continued :**

Title	OFFICER
Name	PAYNE, OTT
Address	4514 LAVISTA DR
City-State-Zip:	ORLANDO FL 32808