

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735245

Entity Name: ORLANDO LODGE NO. 766 LOYAL ORDER OF MOOSE, INC.**Current Principal Place of Business:**5001 N. ORANGE BLOSSOM TRL.
ORLANDO, FL 32810**Current Mailing Address:**5001 N. ORANGE BLOSSOM TRL.
ORLANDO, FL 32810**FEI Number: 59-0338210****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, 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

Date

Officer/Director Detail :

Title D
Name HALE, FRED
Address 4360 S ORLANDO PKWY
4359 WORTH ST
City-State-Zip: ORLANDO FL 32808

Title SECRETARY
Name ONEAL, DAN
Address 211 MARGARET RD
City-State-Zip: SANFORD FL 32771

Title TREASURER
Name MILLWATER, EDWARD
Address 924 TIMOR AVE
City-State-Zip: ORLANDO FL 32804

Title VP
Name RYAN, EDWARD
Address 1213 DENSMORE DR
City-State-Zip: WINTER PARK FL 32792

Title OFFICER
Name HICKEY, ROBERT
Address PO BOX 1251
City-State-Zip: APOPKA FL 32704

Title PRESIDENT
Name CHARLES, BENSON
Address 1817 BLUFF OAK ST
City-State-Zip: APOPKA FL 32712

Title OFFICER
Name CAIME, AL
Address 800 RIO ALA MANO DR
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title OFFICER
Name MOWRY, SCOTT
Address PO BOX 608
City-State-Zip: APOPKA FL 32704

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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**SECRETARY****04/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|--------------------|
| Title | OFFICER |
| Name | GLOVER, STEVEN |
| Address | 3906 BAYFRONT PKWY |
| City-State-Zip: | ORLANDO FL 32806 |