

**2023 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 US**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 OFFICER, TRUSTEE  
Name IRVIN, ANGELA  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title OFFICER, TRUSTEE  
Name WEBER, DEBRA  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title PRESIDENT  
Name MOSER-BARKER, JAMES  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title OFFICER, TRUSTEE  
Name COLEMAN, MICHELLE  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title OFFICER, TREASURER  
Name GARRETT, STELLA  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title OFFICER, VP  
Name DOTZERT, LINDA  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title OFFICER, ADMINISTRATOR  
Name BOYD, CASSANDRA  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

Title OFFICER, PRELATE  
Name HOUGHTON, GAIL  
Address 5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip: ORLANDO FL 32810

**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: CASSANDRA BOYD****ADMINISTRATOR****04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title               OFFICER, JR PAST PRESIDENT  
Name               IHLANFELDT, DAVID  
Address            5001 N. ORANGE BLOSSOM TRL.  
City-State-Zip:    ORLANDO FL 32810