

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750713

**FILED  
Apr 17, 2014  
Secretary of State  
CC1480349212**

**Entity Name:** FORT PIERCE LODGE NO. 248, LOYAL ORDER OF MOOSE, INC.

**Current Principal Place of Business:**

325 PANDORA AVE  
FORT PIERCE, FL 34951

**Current Mailing Address:**

325 PANDORA AVE  
FORT PIERCE, FL 34951 US

**FEI Number: 59-0652258**

**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 P  
Name HELTZER, EDWARD  
Address 6701 CAMPANILLA  
City-State-Zip: FT PIERCE FL 34951

Title T  
Name ALBERTS, CHRISTOPHER J  
Address 6601 CITRUS BLVD.  
City-State-Zip: FORT PIERCE FL 34951

Title S  
Name MACFARLAND, BERNARD  
Address 7103 DONLON RD.  
City-State-Zip: FORT PIERCE FL 34951

Title T  
Name MALLORY, PETER  
Address 6507 ZAPOTE.  
City-State-Zip: FORT PIERCE FL 34951

Title D  
Name GENEUX, DOUGLAS  
Address 357 BORRACLUGH ST.  
City-State-Zip: FORT PIERCE FL 34982

Title O  
Name LEIGH, SARGENT  
Address 7603 PACIFIC AVE  
City-State-Zip: FORT PIERCE FL 34951

*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: BERNARD MACFARLAND**

**ADMINISTRATOR**

**04/17/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date