

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

DOCUMENT# N94000000793

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC6205419921**

**Entity Name:** INDIAN RIVER MOOSE LEGION NO. 178, INC.

**Current Principal Place of Business:**

5001 NORTH O.B.T.  
ORLANDO, FL 32810

**Current Mailing Address:**

P.O. BOX 607865  
ORLANDO, FL 32860 US

**FEI Number: 23-7395688**

**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 S  
Name O'NEAL, DAN C  
Address 211 MARGARET RD  
City-State-Zip: SANFORD FL 32771

Title DIRECTOR  
Name NICHOLS, TOMMY  
Address 3224 MANATEE RD  
City-State-Zip: TAVARES FL 32778

Title DIRECTOR  
Name NADEAU, JAMES  
Address 4259 FORT COURAGE CIRCLE  
City-State-Zip: KISSIMMEE FL 34746

Title PRESIDENT  
Name MIKE, OLMSTEAD  
Address 5021 ST MARIE AVE  
City-State-Zip: ORLANDO FL 32812

Title DIRECTOR  
Name GAUTSCH, HARRY  
Address 6659 BAMBOO AVE  
City-State-Zip: COCOA FL 32927

Title DIRECTOR  
Name HAYSTEAD, JOHN  
Address 510 APOLLO AVE  
City-State-Zip: ST CLOUD FL 34773

Title DIRECTOR  
Name HOLTHUSEN, MATT  
Address 616 CARDINAL ST  
City-State-Zip: OCOEE FL 34761

*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 O'NEAL**

**SECRETARY**

**03/20/2014**

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

\_\_\_\_\_  
Date