

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002811

Entity Name: MANATEE MOOSE LEGION NO. 58, INC.**Current Principal Place of Business:**188 MARSEILLE DR
NAPLES, FL 34112-7207**Current Mailing Address:**188 MARSEILLE DR
NAPLES, FL 34112-7207 US**FEI Number:** 59-1662487**Certificate of Status Desired:** Yes**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 SECRETARY
Name KELLY , JAMES F III
Address 188 MARSEILLE DR
City-State-Zip: NAPLES FL 34112-7207

Title DIRECTOR
Name AKERS, THOMAS CLAUDE
Address 5504 MEADOW LARK LN.
City-State-Zip: BOKEELIA FL 33922

Title PRESIDENT
Name FULTZ, ROBERT S
Address 910 GOLDEN BEACHBLVD.
City-State-Zip: VENICE FL 34285

Title VP
Name DURAN, MARVIN
Address 11565 N CAROLINA DR.
City-State-Zip: BONITA SPRINGS FL 34135

Title DIRECTOR
Name SEAL, TERRY W SR.
Address 408 VILLA NUEVA
City-State-Zip: NORTH PORT FL 34287

Title FINANCIAL DIRECTOR
Name DONALD, GREEN J
Address 12655 HARNEY STREET
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name RHODES, JOHN S
Address 24033 DIETZ DR.
City-State-Zip: BONITA SPRINGS FL 34135

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: JIM KELLY**SECRATERY****04/21/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date