

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90050 018 \*\*\*\*61.25

**DOCUMENT # 700455**

1. Entity Name  
**DAYTONA BEACH LODGE NO 1263 LOYAL ORDER OF  
MOOSE, INC.**



Principal Place of Business  
**601 W. GRANADA BLVD  
ORMOND BEACH, FL 32174 US**

Mailing Address  
**601 W GRANADA BLVD  
ORMOND BCH, FL 32174 US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-0586496**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**GOV  
BORK, HB  
16 N. RAVENFIELD LANE  
ORMOND BEACH, FL 32174** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PG  
VELARDI, JOSEPH  
136 DEER RUN LAKE DRIVE  
ORMOND BEACH, FL 32174** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
MURPHY, JOHN P  
26 PINE VALLEY CIRCLE  
ORMOND BEACH, FL 32174** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**JG  
HOOKER, WAYNE  
P.O. BOX 1767  
ORMOND BEACH, FL 32175** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
FIETY, JAMES  
10 HIGHWOOD RIDGE TRAIL  
ORMOND BEACH, FL 32174** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
FIETY, JAMES  
10 HIGHWOOD RIDGE TRAIL  
ORMOND BEACH, FL 32174** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PG** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ADMINISTRATOR  
JACK R. RAFOOL  
2263 John Anderson Dr  
Ormond Bch, FL 32174** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Jack R. Rafool Admin JACK R RAFOOL 4-11-08 (386) 673-8722**