

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 27, 2004 8:00 am
Secretary of State

09-27-2004 90002 033 ****61.25

DOCUMENT # 701925					
1. Entity Name TITUSVILLE LODGE NO. 1962 LOYAL ORDER OF MOOSE, INC.					
Principal Place of Business 3264 N US #1 MIMS, FL 32754-0332 US			Mailing Address P.O. BOX 332 MIMS, FL 32754-0332 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		14027417 	
City & State		City & State		4. FEI Number 59-0991559	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent 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 reappointing) DATE					
Filing Fee is \$61.25 Due by September 8, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GD LANDRY, MICHAEL E 3321 BROCKETT RD MIMS, FL 32754	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	GD RAYMOND, RICHARD 4315 HOG VALLEY RD MIMS, FL 32754	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HUSSEY, ROBERT 3700 GLORIA AVE MIMS, FL 32754	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MATULA, PAUL 2247 CIRRIUS BLVD LEESBURG, FL 34748	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GRAY, CLARE 108 PERSON AVE TITUSVILLE, FL 32796	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POST, DONALD 5368 BLUEHILL RD MIMS, FL 32754	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CALDWELL, JAMES 4140 HOG VALLEY RD MIMS, FL 32754	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CAMERON, LARRY 3540 ROOSEVELT AVE MIMS, FL 32754	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD WENDEL, TERRANCE 4260 HOG VALLEY RD MIMS, FL 32754	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: <u>Terrance Wendel</u> TERRANCE WENDEL			9/24/04 321-267-6700 Date Daytime Phone #		