

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703753

1. Entity Name

INDIAN MOUND GRANGE NO 177 INC

Principal Place of Business

Mailing Address

1624 TALBOTT STREET, S.E.
PALM BAY FL 32909

1624 TALBOTT STREET, S.E.
PALM BAY FL 32909

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7215479

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

OLIVERI, JOYCE D.
1624 TALBOTT ST. S.E.
PALM BAY FL 32909

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
S
OLIVERI, JOYCE
1624 TALBOTT ST., S.E.
PALM BAY FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
S
SMITH, WALTER
PO BOX 205
WINTER BCH FL 32971- ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
DT
HOWARD, HERBERT
TRINITY TOWERS #411
MELBOURNE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
606 E. Sheridan Rm. 109A ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
ECD
THIBAUT, CHESTER
708 ANITA ST
FT PIERCE FL 34982 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
Muriel Thibault
708 Anita St.
Ft Pierce, Fl. 34982 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
ECD
ANDERSON, FRED
1265 ETHEL CIRCLE
PALM BAY FL 32905 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
5840 E. Hibiscus Rm. 303
Melbourne, FL, 32901 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ 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)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/02

561-569-1168

Date

Daytime Phone #

CR2E037 (9/01)

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-24-2002 90071 046 ****61.25

18785



DO NOT WRITE IN THIS SPACE