FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 3:04

DOCUMENT # **724490** **(8)**

1. Corporation Name

ROYAL PALM BEACH LODGE NO. 2245, LOYAL ORDER OF MOOSE, INC.

Principal Place of Business	Mailing Address
828 "F" ROAD LOXAHATCHEE FL 33470 US	PO BOX 224 LOXAHATCHEE FL 33470 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/05/1972	3a. Date of Last Report: 03/07/1994
4. FEI Number: 23-7213730	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	~~GOVERNOR~~ P.	☒ Change ☐ Addition
NAME	~~MILLER, JIM~~	12 NAME	BUDDY MORRIS	
STREET ADDRESS	~~14863 22ND RD N~~	13 STREET ADDRESS	828 "F" ROAD	
CITY-ST-ZIP	~~LOXAHATCHEE FL~~	14 CITY-ST-ZIP	LOXAHATCHEE, FL. 33470	
TITLE	V	21 TITLE	~~SR. GOVERNOR~~ . VP	☒ Change ☐ Addition
NAME	~~LEE, R J~~	22 NAME	ROBERT BARBIERI	
STREET ADDRESS	~~8057 "F" RD~~	23 STREET ADDRESS	14800 22ND RD. NORTH	
CITY-ST-ZIP	~~LOXAHATCHEE FL~~	24 CITY-ST-ZIP	LOXAHATCHEE, FL. 33470	
TITLE	AS	31 TITLE		☐ Change ☐ Addition
NAME	GIESSOW, DONALD C. SR.	32 NAME		
STREET ADDRESS	78 WESTECUNK DR	33 STREET ADDRESS		
CITY-ST-ZIP	ROYAL PALM BCH FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE	~~PAST~~ P.D	☒ Change ☐ Addition
NAME	~~MORRIS, BUDDY~~	42 NAME	JOSEPH QUEENEL	
STREET ADDRESS	~~828 "F" ROAD~~	43 STREET ADDRESS	13376 MARSELLA BLVD	
CITY-ST-ZIP	~~LOXAHATCHEE FL~~	44 CITY-ST-ZIP	LOXAHATCHEE, FL. 33470	
TITLE	T	51 TITLE		☐ Change ☐ Addition
NAME	WELLER, GEORGE	52 NAME		
STREET ADDRESS	827 PEPPER TREE CIR	53 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH FL	54 CITY-ST-ZIP		
TITLE	D	61 TITLE	~~SR. PAST GOVERNOR~~ D	☒ Change ☐ Addition
NAME	~~ADKINSON, LARRY~~	62 NAME	S.E BIZEMAN	
STREET ADDRESS	~~1829 SUNSET RD~~	63 STREET ADDRESS	11659 DANUA DR.	
CITY-ST-ZIP	~~W PALM BCH FL~~	64 CITY-ST-ZIP	ROYAL PALM BEACH, FL. 33411	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

DONALD C. GIESSOW, SR.

SIGNATURE: Donald C. Giessow, Sr. 3-20-95 407 793-5457
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0081934