2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 724490

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

Current Principal Place of Business:

828
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

958 SOUTH MILITARY TRAIL
PMB 104
WEST PALM BEACH, FL 33415 US

New Mailing Address:

FEI Number: 23-7213730 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: A ( ) Delete
Name: CARACCIO, STEVE
Address: 1844 FAIRVIEW VILLAS DRIVE #3
City-St-Zip: WEST PALM BEACH, FL 33406

Title: T ( ) Delete
Name: KENNINGTON, JAMES
Address: 15095 FOREST LANE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D ( ) Delete
Name: CARALLIO, STEPHEN
Address: 4340 WINCHESTER LANE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: G ( ) Delete
Name: SMITH, DAVID
Address: 11480 68TH STREET NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: STEVE CARACCIO A 04/30/2009

Electronic Signature of Signing Officer or Director — Date