


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jul 31, 2007 08:00 AM
Secretary of State

DOCUMENT # 725075	
1. Entity Name HIALEAH LODGE NO 1074, LOYAL ORDER OF MOOSE INC	

Principal Place of Business 305 E 32ND ST HIALEAH, FL 33013-3214 US	Mailing Address 305 E 32ND ST HIALEAH, FL 33013-3214 US
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DO NOT WRITE IN THIS SPACE



07282007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-0621925	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent C.T. CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324

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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 _____ <small>Signature, typed or printed name of registered agent and state if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD HEATON, ROBERT L 6051 NW 40 TERR VIRGINIA GARDENS, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILLIAMS, JR., ROBERT W 233 E 45 ST HIALEAH, FL 330131827
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD POPOVICH, JOHN W 131 WEST 59 ST HIALEAH, FL 330122623
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CANERO, RAYMOND P 610 WEST 64 DRIVE HIALEAH, FL 330126556
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULLANEY, MICHEAL L 740 W 75 ST HIALEAH, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MILLER, GEORGE W 470 EAST 51 ST. HIALEAH, FL 330131543

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07/31/07-80006-009 61.25

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: 	Date: 7/28/07
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Daytime Phone #</small>