2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# 725647

Entity Name: MARCO ISLAND LODGE NO. 1990, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

20 MARCO LAKE DRIVE
SUITE 3 & 4Z
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

20 MARCO LAKE DRIVE
SUITE 3, 4 & 5
MARCO ISLAND, FL 34145 US

Current Mailing Address:

PO BOX 635
MARCO ISLAND, FL 34146 US

New Mailing Address:

FEI Number: 59-1427977 **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: AD ( ) Delete
Name: FALERNI, JEFF
Address: 211 KIRKWOOD ST.
City-St-Zip: MARCO ISLAND, FL 34145

Title: TD ( ) Delete
Name: DRAPER, THOMAS
Address: 693 SEAVIEW CT A407
City-St-Zip: MARCO ISLAND, FL 34145

Title: GD ( ) Delete
Name: BLAINE, PAUL
Address: 416 MANGO AVE.
City-St-Zip: GOODLAND, FL 34140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AD (X) Change ( ) Addition
Name: FALERNI, JEFFREY M
Address: 211 KIRKWOOD ST.
City-St-Zip: MARCO ISLAND, FL 34145

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

Title: GD (X) Change ( ) Addition
Name: MILLER, WILLIAM B
Address: 686 TIGERTAIL CT
City-St-Zip: MARCO ISLAND, FL 34145

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: JEFFREY M FALERNI AD 04/21/2009

Electronic Signature of Signing Officer or Director — Date