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(((H100000351713)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 : (850)222-1092 Phone Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:					

REGISTERED AGENT CHANGE LOYAL ORDER OF MOOSE, SEBASTIAN RIVER LODGE #1767, I

IN THE CASE OF THE PROPERTY OF

Certificate of Status 0 Certified Copy Page Count 03 Estimated Charge \$35.00

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Help

COVER LETTER

TO:	Amendme Division o	nt Section f Corporations				
SUBJ	ECT:	i	istian River Lodge #1767, Inc.			
		Name	of Corporation			
DOC	UMENT NU	MBER:	732611			
The ea	nclosed State	ment of Change of Registered (Office/Agent and fee are submitted for filing.			
Please	return all co	rrespondence concerning this m	atter to the following:			
	•	Name o	Contact Person			
Firm/Company						
		•	Address			
		·	e and Zip Code			
	, 		@moossintl.org			
	į	e-mail address: (to be used i	or future annual report notification)			
For fur	ther informat	ion concerning this matter, plea	se call:			
·			at () Area Code & Daytime Telephone Number			
	Nam	e of Contact Person	Area Code & Daytime Telephone Number			
Enclose	d is a \$35.00	check made payable to the De	partment of State.			
		Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Flurida Sta n organized under the laws of the State of Flo registered agent, or both, in the State of Flor	rida
	- + +-	2008s, Sebastian River Lodge #1767, Inc.	
2. The principal			
3. The mailing a	ddress (if different):		
4. Date of incorp	oration/qualification: 4/29/	1975 Document number:	732611
	street address of the current regisment of State: (If resigned, enter a	tered agent and registered office on file with tresigned)	he
	CORPORATION SERVICE COM	PANY	
	1201 HAYS STREET TALLAHAS	SSEB FL 32301-2525	
(if changed):	street address of the new registere C T Corporation System	ed agent (if changed) and for registered office	
1	c/o C T Corporation System, 1200 8	South Pine Island Road	
•	P.O. r Plantation, Florida 33324	Box NOT acceptable	
_		street address of the business office of its re	
such change was authorized by the	authorized by resolution duly as board, or the corporation has be	dopted by its board of directors or by an off sen notified in writing of the change.	icer so
		Kimberly Breunling, Vice Pre	sident
l hereby accept to I further agree to of my dutles, and document is bein corporation has b	he appaintment as registered age comply with the provisions of a I am familiar with and accept th g filed merely to reflect a change seen notified in writing of this ch	rinted by Great name and title ent and agree to act in this capacity. Il statutes relative to the proper and comple se obligation of my position as registered as in the registered office address, I hereby c ange.	ite performance gent. Or if this orgirm that the
By:	Poveca a Batt	02/16/2010	
Signa	ture of Registered Acent	Date	
If signing on behi	elf of an entity:		•
	Assistant Secretary Robsont Burth		
Тур	ed or Printed Name	C PDF . 025 nd + + +	

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)