

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732976

1. Entity Name

LOYAL ORDER OF MOOSE GULF GATE LODGE # 608, INC.

FILED  
Mar 05, 2002 8:00 am  
Secretary of State

03-05-2002 90050 043 \*\*\*\*61.25

0051984

Principal Place of Business

6540 SUPERIOR AVENUE  
SARASOTA FL 34231-5836

Mailing Address

6540 SUPERIOR AVENUE  
SARASOTA FL 34231-5836

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1573776

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES INC.  
3953 WW KELLEY ROAD  
TALLAHASSEE FL 32311

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME PD  
STREET ADDRESS HUDSON, BERT L  
CITY-ST-ZIP 372 BEDWOOD ROAD  
VENICE FL 34293 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME VD  
STREET ADDRESS ELMORE, JEFFREY  
CITY-ST-ZIP 2503 APACHE STREET  
SARASOTA FL 34231-5009 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME T  
STREET ADDRESS BILIK, ERIC R  
CITY-ST-ZIP 2404 POST ROAD  
SARASOTA FL 34231 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ADM  
STREET ADDRESS CARRIER, JOHN  
CITY-ST-ZIP 3050 MOHAWK ST.  
SARASOTA FL 34231 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME T  
STREET ADDRESS SEARS, CURTIS J  
CITY-ST-ZIP 603 WATERFORD LANE  
DECATUR IL 62526-9386 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME T  
STREET ADDRESS HASTINGS, DAVID  
CITY-ST-ZIP 3311 8TH STREET  
SARASOTA FL 34238 ☐ Delete

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*John Carrier*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/24/02  
Date

941-921-1139  
Daytime Phone #

CR2E037 (9/01)