

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735896

FILED
Apr 14, 2009
Secretary of State

Entity Name: INVERNESS LODGE NO. 2112, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

221 S HAID TERR
LECANTO, FL 34461

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 219
INVERNESS, FL 344510219

New Mailing Address:

FEI Number: 59-1934090

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: SM () Delete
Name: ROBERT, RICHARD A.
Address: 1460 E. MONOPOLY LOOP
City-St-Zip: INVERNESS, FL

Title: PD () Delete
Name: HARDY, HAROLD
Address: 625 STRATFORD ROAD
City-St-Zip: LECANTO, FL 34461

Title: VD () Delete
Name: MANSKA, WILLIAM
Address: 595 FAIRTLANE TERRACE
City-St-Zip: LECANTO, FL 34461

Title: TD () Delete
Name: STEINHAUSER, ROLAND
Address: 2652 N. EISENHOWER ACE
City-St-Zip: HEAD WATERS, VA 24442

Title: TRD () Delete
Name: CHALKER, JERRY
Address: 860 S. NUTMEG TERR
City-St-Zip: LECANTO, FL 34461

Title: TRD () Delete
Name: ELSASSER, GLENN
Address: 1543 N. SQUIRREL TREE AVE.
City-St-Zip: LECANTO, FL 34461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: RUMSON, WILLIAM
Address: 135 SCARBORO AVE
City-St-Zip: LECANTO, FL 34461

Title: VD (X) Change () Addition
Name: ELSASSER, GLENN
Address: 1543 NORTH SQUIRREL TREE
City-St-Zip: LECANTO, FL 34461

Title: TD (X) Change () Addition
Name: DRYDEN, KEN
Address: 3618 EAST MAXWELL PLACE
City-St-Zip: INVERNESS, FL 34453

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

Title: TRD (X) Change () Addition
Name: POULSEN, DENNIS
Address: 255 N KENSINGTON AVE
City-St-Zip: LECANTO, FL 34461

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: RICHARD A. ROBERT

SM

04/14/2009

Electronic Signature of Signing Officer or Director

Date