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SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA
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Division of Corporations
Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000000
Phone : (850) 229-1091
Fax Number : (850) 878-6368

RE-SUBMIT

78-3368
date of submission 1/1

****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

JENSEN BEACH LODGE NO. 1690, LOYAL ORDER OF MOOSE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	024
Estimated Charge	\$35.00

F MOOSE, Inc.
RA/RCHS
10 1/50/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Jensen Beach Lodge No. 1690, Loyal Order Of Moose, Inc.
Name of Corporation

DOCUMENT NUMBER: 738745

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

shermanna@mooseintl.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person at () Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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 (1/05)



January 14, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

JENSEN BEACH LODGE NO. 1690, LOYAL ORDER OF MOOSE, INC.

P. O. BOX 1327

JENSEN BEACH, FL 34958-1327US

SUBJECT: JENSEN BEACH LODGE NO. 1690, LOYAL ORDER OF MOOSE, INC.

REF: 738745

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent name is incorrect. Our records show JOSEPH P. FUELL.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: H10000009448
Letter Number: 310A00001173

RECEIVED
2010 JAN 20 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida
_____ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Jensen Beach Lodge No. 1690, Loyal Order Of Moose, Inc.
2. The principal office address: _____
3352 N.E. EAST CT. JENSEN BEACH FL 34957
3. The mailing address (if different): _____
P. O. BOX 1327 JENSEN BEACH FL 34958-1327
4. Date of incorporation/qualification: 04/19/1977 Document number: 738745
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

Joseph P Fuell

3352 NE East Court, Jensen Beach FL 34957

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.


Signed by an officer or director

Kimberly Breunling, Vice President

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity,
I further agree to comply with the provisions of all statutes relative to the proper and complete performance
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.*

By: CT Corporation System

Signature of Registered Agent

01/14/2010

Date

If signing on behalf of an officer or director:
Bernadette McNamara
Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2B045 (8/05)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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