

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90100 021 ****70.00

DOCUMENT # 739867

1. Entity Name

BIG PINE KEY LODGE NO. 1585 LOYAL ORDER OF MOOSE

Principal Place of Business

Mailing Address

21ST STREET & WILDER RD.
 LODGE 1585
 BIG PINE KEY FL 33043

PO BOX 430749
 LODGE 1585
 BIG PINE KEY FL 33043-0749

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1706927

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

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 | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|-----------------|--------------------|--------------------|-------|------|----------------|-----------------|
| | TRT | | | | | | |
| | WILDEY, KENNETH | 2224 MATTHEWS RD | BIG PINE KEY FL | | | | |
| | D | SAZBO, FRED | PO BOX 430247 | | | | |
| | D | HUGHES, CHARLES L | 29563 SARATOGA AVE | | D | FRANK BIAYLOCK | 19266 HANSEN RD |
| | D | DICKEY, THOMAS | PO BOX 43 | | | SUGARLOFF F1 | 33042 |
| | DS | CONKRIGHT, RICHARD | 31220 AVE I | | | | |
| | | | | | | | |

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:

Richard W. Conkright
RICHARD W. CONKRIGHT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-2000 305872-1141

Date

Daytime Phone #

CR2E037 (9/99)