

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90411 027 ****70.00

USA

DOCUMENT # 739867

1. Entity Name

BIG PINE KEY LODGE NO. 1585 LOYAL ORDER OF MOOSE

Principal Place of Business

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

Mailing Address

PO BOX 430749
 LODGE 1585
 BIG PINE KEY FL 33043

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

Zip

Country

Zip

Country

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	D	<input type="checkbox"/> Delete
NAME	SAZBO, FRED	
STREET ADDRESS	PO BOX 430247	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE	D	<input type="checkbox"/> Delete
NAME	DICKEY, THOMAS	
STREET ADDRESS	PO BOX 43	
CITY-ST-ZIP	BIG PINE KEY FL 33043	
TITLE	DS	<input type="checkbox"/> Delete
NAME	CONKRIGHT, RICHARD	
STREET ADDRESS	31220 AVE I	
CITY-ST-ZIP	BIG PINE KEY FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BIAYLOCK, FRANK	
STREET ADDRESS	19266 HANSEN RD	
CITY-ST-ZIP	SUMMERLAND KEY FL 33042	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

D
KENNETH WALLAGH
29488 GERALD IN 659
BIG PINE KEY FL 33043

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** 5/13/2001

CR2E037 (10/00)