## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 739867** 

FILED May 20, 2010 Secretary of State

Entity Name: BIG PINE KEY LODGE NO. 1585 LOYAL ORDER OF MOOSE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

381 WILDER RD. **LODGE 1585** 

BIG PINE KEY, FL 33043

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 430749

BIG PINE KEY, FL 33043

FEI Number: 59-1706927 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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:**

KENNETH, BYGLER Name: Address: 29178 CAMELLIA LN. City-St-Zip: BIG PINE KEY, FL 33043

Title:

Name: ROGER, THOMAS Address: 31263 AVE G

City-St-Zip: BIG PINE KEY, FL 33043

Title: DS

ZIMMERMAN, JOHN Name: Address: #71 COUNTRY RD City-St-Zip: BIG PINE KEY, FL 33042

Title:

Name: MAURIELLO, STEVEN C PO BOX 430836 Address: City-St-Zip: BIG PINE KEY, FL 33043

Title:

ED, DUNN Name: PO BOX 40824 Address:

SUMMERLAND KEY, FL 33043 City-St-Zip:

Title:

RON. WIDMAIER Name: Address: 537 HECK AVE

LITTLE TORCH KEY, FL 33043 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: JOHN ZIMMERMAN DS 05/20/2010