

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 744319

1. Entity Name
**GAINESVILLE LODGE NO. 1140, LOYAL ORDER OF
MOOSE, INC.**



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV -2 AM 10:06

Principal Place of Business
1414 N.E. 23RD AVE
GAINESVILLE, FL 32609-3869

Mailing Address
POST OFFICE BOX 234
GAINESVILLE, FL 32602-0234



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10202004 REIN-NP CR2E099 (6/04)

City & State

City & State

4. FEI Number
59-0651892

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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. I am familiar with, and accept the obligations of registered agent.

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
After January 1, 2005, Fee will be \$122.50**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME HOFFMAN, BILL
STREET ADDRESS 2338 N.W. 119TH AVENUE
CITY-ST-ZIP GAINESVILLE, FL

TITLE D ☒ Delete
NAME PLATH, RICHARD
STREET ADDRESS 4139 S.W. ARCHER ROAD, LOT 1
CITY-ST-ZIP GAINESVILLE, FL 32608

TITLE DT ☐ Delete
NAME PIERCE, EARL A
STREET ADDRESS 6111 N.W. 31ST TERRACE
CITY-ST-ZIP GAINESVILLE, FL 32653

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME STANLEY PARSONS
STREET ADDRESS 2200 NE WALDO RD LOT 40
CITY-ST-ZIP GAINESVILLE, FL 32609

TITLE D ☐ Change ☒ Addition
NAME STEVE RODGERS
STREET ADDRESS 1600 NE 12TH AVE LOT 36
CITY-ST-ZIP GAINESVILLE, FL 32601

TITLE ☐ Change ☐ Addition
NAME 000042409900
STREET ADDRESS 11/02/04--01046--006 **70.00
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Earl A. Pierce
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-1-04 352-376-0019
Date Daytime Phone #

EARL A. PIERCE

1119 @