

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

03 MAR 21 AM 5:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 744319

1. Corporation Name

GAINESVILLE LODGE NO. 1140, LOYAL ORDER OF
MOOSE, INC

2. Principal Office Address

1414 N.E. 23RD AVE

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 234

Suite, Apt. #, etc.

City & State

GAINESVILLE, FL

Zip

32609-3869

Country

City & State

GAINESVILLE, FL

Zip

32602-0234

Country

USA

REINSTATEMENT 01-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/18/78

5. FEI Number

590651892

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

12001 3340841
1200 South Pine Island Road 13/03/03--01065--009 **358 75

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Jeffrey R. Graves

Assistant Secretary

Date February 6, 2003

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Bill Hoffman	2338 NW 119 Ave	Gainesville, FL 32609
D	Richard Plath	4139 SW Archer Rd Lot 1	Gainesville FL 32608
D	Earl A. Pierce	6111 NW 31 st Ter	Gainesville, FL 32653
I	Earl A. Pierce	6111 NW 31 st Ter	Gainesville, FL 32653

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Earl A. Pierce

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EARL A. PIERCE 2-24-03 352-326-0019

Date

Daytime Phone #

CR2E081 (10/02)