2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **749555**

1. Entity Name

HOLLYWOOD LODGE NO. 919, LOYAL ORDER OF MOOSE, I

changed, or on an attachment with an address, with all other like empowered

SIGNATURE: (Caracter)

Principal Place of Business Mailing Address MOOSE, INC. MOOSE, INC. 2907 TAYLOR STREET 2907 TAYLOR STREET HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-0594439 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LEXIS DOCUMENT SERVICES INC. 3953 WW KELLEY ROAD TALLAHASSEE FL 32301 City Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE Addition Change NAME MITKOWSKI, ANTHONY NAME STREET ADDRESS STREET ADDRESS 2907 TAYLOR ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 TITLE PC ☐ Delete TITLE Change Addition NAME FOSTER. MIKE NAME STREET ADDRESS STREET ADDRESS 6211 THOMAS ST CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL 33024 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME KZUMIN, HARRY NAME STREET ADDRESS **5722 HARRISON ST** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33023-1476 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PEPITONE, PETER J NAME STREET ADDRESS STREET ADDRESS 3135 S OCEAN DR #330 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL TITLE ☐ Delete TITLE Change ☐ Addition MOLE, WALTER NAME STREET ADDRESS STREET ADDRESS 2909 MADISON ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Mar 01, 2001 8:00 am Secretary of State

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