

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90288 048 ****70.00

DOCUMENT # 749555

1. Entity Name

**HOLLYWOOD LODGE NO. 919, LOYAL ORDER OF
MOOSE, INC.**



Principal Place of Business

**MOOSE, INC.
2907 TAYLOR STREET
HOLLYWOOD FL 33020**

Mailing Address

**MOOSE, INC.
2907 TAYLOR STREET
HOLLYWOOD FL 33020**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-0594439

Applied For

Not Applicable

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

**C T CORPORATION SYSTEM
1200 SOUTH 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
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
NAME **SM**
STREET ADDRESS **MITKOWSKI, ANTHONY**
CITY-ST-ZIP **2907 TAYLOR ST
HOLLYWOOD FL 33020**

TITLE ☐ Change ☒ Addition
NAME **TREASURER**
STREET ADDRESS **DANIEL MARTEN**
CITY-ST-ZIP **6162 E. 4TH AVE
HIALEAH FL. 33013**

TITLE ☒ Delete
NAME **KZUMIN, HARRY**
STREET ADDRESS **5722 HARRISON ST**
CITY-ST-ZIP **HOLLYWOOD FL 33023-1476**

TITLE ☐ Change ☒ Addition
NAME **TRUSTEE**
STREET ADDRESS **ARNIE SPEERS**
CITY-ST-ZIP **310 CAMBRIDGE RD
HOLLYWOOD FL. 33024**

TITLE ☐ Delete
NAME **MOLE, WALTER**
STREET ADDRESS **2909 MADISON ST**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☒ Change ☐ Addition
NAME **TRUSTEE**
STREET ADDRESS **WALTER MOLE**
CITY-ST-ZIP **2909 MADISON ST
HOLLYWOOD FL. 33020**

TITLE ☐ Delete
NAME **HUCK, DAN**
STREET ADDRESS **PO BOX 6563**
CITY-ST-ZIP **HOLLYWOOD FL 33081**

TITLE ☒ Change ☐ Addition
NAME **ADMINISTRATOR**
STREET ADDRESS **DAN HUCK**
CITY-ST-ZIP **3300 N. ST. RD. 7 G563
HOLLYWOOD FL. 33021**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **TRUSTEE**
STREET ADDRESS **GEORGE ZAYAZ**
CITY-ST-ZIP **2521 CLEVELAND ST, APT. 206
HOLLYWOOD FL. 33020**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **PRELATE**
STREET ADDRESS **ROCKY GRECO**
CITY-ST-ZIP **200 GATE RD APT. 112
HOLLYWOOD FL. 33024**

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:

Daniel J. Huck **DANIEL J. HUCK**

4-9-04

954-927-0826

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #