NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

Principal Place of Business

749877

(7)

Mailing Address

CLEARWATER LODGE NO. 1030, LOYAL ORDER OF MOOSE, INC.

150 MCMULLEN BOOTH ROAD CLEARWATER FL 34619			150 MCMULLEN BOOTH ROAD CLEARWATER FL 34619						
						3. Date Incorporated or Qualified 11/21/1979	3a. Date of Last 04/12/1		
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number 59-0611296		Applied For	
Suite, Apt. #	t etc	Suite, Apt. #, etc				39 0011290	e 0 7	Not Applicable 5 Additional	
22	r, 610.	27	<u> </u>			5. Certificate of Status Desired	7	Required	
City & State		City & State	h			6. Election Campaign Financing	, 5 T T T T T T T T T T T T T T T T T T		
23] Zip	Country	28	Zip Country			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30	,		Florida Statutes Service Statutes Service Service Statutes Service Ser			
	9. Name and Address of Cu					10. Name and Address of New Registered Agent			
				81	Name				
	PORATION SYSTEM		}	82	Street A	Address (P.O. Box Number is Not Acceptable)		 	
	uth Pine Island Road Yon Fl 33324			83					
POWIN	ION FL 33324		<u>_</u>	84	City		66 7	ip Code	
				84	City			ip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE _	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE Registered	Agent	t signature re	quired when reinstating)	DATE		
12.		AND DIRECTORS	13.	<u>.</u>		ADDITIONS/CHANGES TO OFFICER		ORS IN 12	
TITLE	SM	X DELETE	1.1 70	ΓLĒ				Addition	
NAME				ME		HARRINGTON, DONALD H.			
STREET ADDRESS				1.3 STREET ADDRESS		150 MC MULLEN BOOTH RD CLEARWATER FL 34619			
CITY-ST-ZIP			1.4 C(1	1.4 CITY - ST - ZIP		5			
TITLE	PD	□DELETE 21		LE		PD	Change	☐ Addition	
NAME	WHALLEN, HORACE E		2.2 NA			ZOANETTE, VICTOR			
STREET ADDRESS	2012 BELLHURST DRIVE				ADDRESS	247 MCMULLEM BOOTH ROAD			
CITY-ST-ZIP TITLE	DUNEDIN FL VD	□DELETE	2 4 CI 3 1 TIT		F · ZiP	CLEARWATER FL 34619 VD	☐XI Change	Addition	
NAME	TO MICHE MOTOR					FOSTER, CHARLES W			
STREET ADDRESS	247 MCMULLEN BOOTH F	RUAD	3 2 NA		ADDRESS	1617 S EVERGREEN AV	E		
CITY - ST - ZIP	CLEARWATER FL	10/10	3 4 CI			CLEARWATER FL 3461	6		
TITLE	D	™ 0€LETE	4.1 TH			D	X Change	Addition	
NAME	KEELEY, PETER F		4. 2 N/	AME		MCCUNE, JESSE			
STREET ADDRESS	2062 VILLA TERRACE		4.3 ST	REET.	ADDRESS	2436 RHODESIAN DR #			
CITY-ST-ZIP	CLEARWATER FL		4.4 CIT		T - ZIP	CLEARWATER FL 3462			
TITLE	0	DELETE 5.1				D	Change	☐ Addition	
NAME	SOUTAR, JOHN J	MD #207	5 2 NA			REICHARDT, NORMAN			
STREET ADDRESS	1450 HEATHER RIDGE BL DUNEDIN FL	YU. #201			ADDRESS	1366 WINDSOR DR CLEARWATER FL 34616			
CITY-ST-ZIP TITLE	do.		5.4 CII 6.1 TiT		1 - ZIP			Addition	
NAMÉ	NET ATE		6.2 NA				L.J Unanys	L.J Addition	
STREET ADDRESS	1905 PALM DRIVE				ADDRESS				
CITY-ST-ZIP	CLEARWATER FL		6.4 Di		1				
14. I do hereb	y certify that the information suppl		furnished and d	does	s not qua	lify for the exemption stated in Section 119.07(3			
certify that the information indicated on this annual report or supplemental annual 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 12 or Block 12 or Block 12 or on an attachment with an address.									

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR E

140, 4-30-96 Date 813-70 Days 1 47 9

CR2E037 (12/95