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May 01 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 749877 (7)

1. Corporation Name

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

Principal Place of Business

150 MCMULLEN BOOTH ROAD
CLEARWATER FL 34619

Mailing Address

150 MCMULLEN BOOTH ROAD
CLEARWATER FL 34619

3. Date Incorporated or Qualified
11/21/1979

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-0611296

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip 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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S
NAME HARRINGTON, DONALD H
STREET ADDRESS 150 MC MULLEN BOOTH RD
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

TITLE PD
NAME WHALLEN, HORACE E
STREET ADDRESS 2012 BELLHURST DRIVE
CITY-ST-ZIP DUNEDIN FL

☒ DELETE

TITLE VD
NAME ZOANETTE, VCTOR
STREET ADDRESS 247 MCMULLEN BOOTH ROAD
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

TITLE D
NAME MCCUNE, JESSE
STREET ADDRESS 2436 RHODESIAN DR., #30
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

TITLE D
NAME SOUTAR, JOHN J
STREET ADDRESS 1450 HEATHER RIDGE BLVD. #207
CITY-ST-ZIP DUNEDIN FL

☐ DELETE

TITLE TD
NAME HEIT, STEVE
STREET ADDRESS 1905 PALM DRIVE
CITY-ST-ZIP CLEARWATER FL

☒ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

JOHN H KELLY
3432 SR580 #232
SAFETY HARBOR FL 34695

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☒ Change ☐ Addition

14. I do 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 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 13 if changed, or on an attachment with an address.

SIGNATURE:

DONALD H HARRINGTON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813 791-9214

Date

Daytime Phone # 0077061

CR2E037 (9/96)