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CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -2 PM 3:18

DOCUMENT # **750713** **(0)**

1. Corporation Name

FORT PIERCE LODGE NO. 248, LOYAL ORDER OF MOOSE, INC.

Principal Place of Business	Mailing Address
3505 KIRBY LOOP RD. FORT PIERCE FL 34981 US	3505 KIRBY LOOP RD. FORT PIERCE FL 34981 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/22/1980
3a. Date of Last Report: 06/15/1994
4. FEI Number: 59-0652258 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

9. Name and Address of Current Registered Agent

KING, JAMES
609 IXORIA AVE.
SUITE 4
FT. PIERCE FL 34981

10. Name and Address of New Registered Agent

81 Name: DAVID J. TROUT
82 Street Address (P.O. Box Number is Not Acceptable): 480 EAST PRIMA VISTA BLVD.
83:
84 City: PORT ST. LUCIE **FL** 85 Zip Code: 34983

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

*SIGNATURE: David J. Trout — 5-27-95
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	G	11 TITLE	G ☐ Change ☐ Addition
NAME	CLARK, ROBERT L.	12 NAME	CLARK, ROBERT L.
STREET ADDRESS	A-38 MOCKINGBIRD	13 STREET ADDRESS	A38 MOCKINGBIRD
CITY-ST-ZIP	FT. PIERCE FL	14 CITY-ST-ZIP	FT. PIERCE, FL.
TITLE	G	21 TITLE	G ☐ Change ☐ Addition
NAME	CARTER, ROBERT	22 NAME	CARTER, ROBERT
STREET ADDRESS	14142 DAHLIA	23 STREET ADDRESS	14142 DAHLIA
CITY-ST-ZIP	FT. PIERCE FL	24 CITY-ST-ZIP	FT. PIERCE, FL.
TITLE	T	31 TITLE	T ☑ Change ☐ Addition
NAME	MCDONNELL, JOHN H.	32 NAME	BUCHANAN, ANDREW
STREET ADDRESS	5401 HICKORY DR.	33 STREET ADDRESS	915 GATEWOOD AVE
CITY-ST-ZIP	FT PIERCE FL	34 CITY-ST-ZIP	FORT PIERCE, FL. 34982
TITLE	A	41 TITLE	A ☑ Change ☐ Addition
NAME	KING, JAMES	42 NAME	TROUT, DAVID J.
STREET ADDRESS	609 IXORIA AVE., #4	43 STREET ADDRESS	480 EAST PRIMA VISTA BLVD
CITY-ST-ZIP	FT PIERCE FL	44 CITY-ST-ZIP	PORT ST. LUCIE, FL. 34983
TITLE	T	51 TITLE	T ☑ Change ☐ Addition
NAME	GAULIN, NORMAN	52 NAME	RALPH GERSONY
STREET ADDRESS	4964 NE FOXWORTH AVE.	53 STREET ADDRESS	5911 BALSAM DR.
CITY-ST-ZIP	FT. ST. LUCIE FL	54 CITY-ST-ZIP	FT. PIERCE, FL.
TITLE	T	61 TITLE	T ☑ Change ☐ Addition
NAME	MROZ, JOSEPH A.	62 NAME	DAVID G. WILSON
STREET ADDRESS	3100 N. A1A	63 STREET ADDRESS	509 S. 26th STREET
CITY-ST-ZIP	FT PIERCE FL	64 CITY-ST-ZIP	FT. PIERCE, FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: David J. Trout — DAVID J. TROUT — 5/1/95 — 407-464-5718
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0070101