

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 751435 (9)
1. Corporation Name
DELAND LODGE NO. 1126, LOYAL ORDER OF MOOSE, INC



Principal Place of Business 614 SO. ALABAMA AVE PO BOX 0045 DELAND FL 32724 US	Mailing Address 614 S. ALABAMA AVE. PO BOX 0045 DELAND FL 32721-7045
--	--

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

3. Date Incorporated or Qualified 03/07/1980	4. FEI Number 59-0608332	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. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		

9. Name and Address of Current Registered Agent
**FREEMAN, GUSTAVE
131 S. ORANGE AVE
DELAND FL 32720**

10. Name and Address of New Registered Agent
81 Name **Donald Robinson**
82 Street Address (P.O. Box Number is Not Acceptable)
PO BOX 3244 1544 So. Boundary Ave
83
84 City **DeLand** FL **FL** 85 Zip Code **32720**

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 of 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 **Donald Robinson** **Donald Robinson** **02-18-98**
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 NAME STREET ADDRESS CITY - ST - ZIP	D ROBINSON, DONALD P.O. BOX 3244 1544 So Boundary Ave DELAND FL Deland FL 32720	☒ Change ☐ Addition D Charles Weir 1105 W Voorhis Ave DeLand FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SA FREEMAN, GUSTAVE 131 S. ORANGE AVE. DELAND FL	☒ Change ☐ Addition SA Donald Robinson PO BOX 3244 1544 So Boundary Ave DeLand FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MEEHAN, JAN 1491 ROCKINGHAM DR. DELAND FL	☒ Change ☐ Addition D Robert Grier 2450 Ben Franklin Dr DeLand FL 32720
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LAIRD, CHARLES 1700 S CLARA AVE DELAND FL	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SISLO, DICK 1610 W WAYCROSS CIRCLE DELTONA FL	☒ Change ☐ Addition D Charles Tolas 1887 N Sparkman Ave Orange City FL 32763
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FRIEND, JOHN 115 W. DUNDEE AVE. DELEON SPGS FL	☐ Change ☐ Addition

14. 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 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 Robinson** **Donald Robinson** **2-18-98** **904-734-2446**
Signature and typed or printed name of signing officer or director Date

CR2E037 (10/97)