

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 06, 2007 8:00 am
Secretary of State

08-06-2007 90032 016 ****61.25

DOCUMENT # 752240

1. Entity Name

JACKSONVILLE LODGE NO. 455, LOYAL ORDER OF
MOOSE, INC.



Principal Place of Business

3834 SOUTHSIDE BLVD
JACKSONVILLE FL 32216
US

Mailing Address

3834 SOUTHSIDE BLVD
JACKSONVILLE FL 32216
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/07)

4. FEI Number

59-0306273

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROWN, JOHN
3834 SOUTHSIDE BLVD
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name JOHN BROWN
Street Address (P.O. Box Number is Not Acceptable)

3834 SOUTHSIDE BLVD

City JACKSONVILLE

FL

Zip Code 32216

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

John W Brown

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

8-1-07

DATE

FILE NOW: FEE IS \$61.25
Due By September 5, 2007

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

TITLE
NAME OWENS, RAYMOND ☒ Delete
STREET ADDRESS 2551 SANDUSKY AVE E
CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE
NAME KISH, KENNETH PRELATE ☒ Delete
STREET ADDRESS 5313 TILTING OAK CT. E
CITY-ST-ZIP JACKSONVILLE FL 32258

TITLE
NAME MILLER, BERNIE ☒ Delete
STREET ADDRESS 7204 GLENDYNE DR N
CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE
NAME JUSTICE, DAVID ☒ Delete
STREET ADDRESS 8203 HIGHLAND AVE
CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE
NAME BROWN, JOHN ☒ Delete
STREET ADDRESS 9775 CREEK FRONT RD. APT. 1703
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE
NAME SINGLETARY, ROBERT GOV ☒ Delete
STREET ADDRESS 2616 EMILY LN
CITY-ST-ZIP JACKSONVILLE FL 32216

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TRUSTEE ☐ Change ☒ Addition
NAME JOHN W. BROWN
STREET ADDRESS 9775 CREEK FRONT RD APT 1703
CITY-ST-ZIP JAX FL 32256

TITLE PRELATE ☐ Change ☒ Addition
NAME GEORGE BRYANT
STREET ADDRESS 440 DALRY DR
CITY-ST-ZIP JAX FL 32246

TITLE GOVERNOR ☐ Change ☒ Addition
NAME ROBERT SINGLETARY
STREET ADDRESS 2616 EMILY LN
CITY-ST-ZIP JAX FL 32216

TITLE TRUSTEE ☐ Change ☒ Addition
NAME DAVID WAGNER
STREET ADDRESS 7133 ARLET DR
CITY-ST-ZIP JAX FL 32211

TITLE ADMINISTRATOR ☐ Change ☒ Addition
NAME JOHN BROWN
STREET ADDRESS 3834 SOUTHSIDE BLVD
CITY-ST-ZIP JAX FL 32216

TITLE JR GOV. ☐ Change ☒ Addition
NAME ALLEN HENDERSON
STREET ADDRESS 14339 ALEXIS RD
CITY-ST-ZIP JAX FL 32218

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

John W Brown

8-1-07