

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90313 007 ****61.25

DOCUMENT # 754419

1. Entity Name

MARIANNA LODGE NO. 1026, LOYAL ORDER OF
MOOSE, IOSE, INC.



Principal Place of Business

3407 HWY 90
MARIANNA FL 32447
US

Mailing Address

P O BOX 1
MARIANNA FL 32447
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2013156

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 **P** ☒ Delete
NAME PUTNAM, THOMAS
STREET ADDRESS 3407 HWY 90
CITY-ST-ZIP MARIANNA FL 32447

TITLE **V** ☒ Delete
NAME SLOAN, DAVID
STREET ADDRESS 1874 TOBE LANE
CITY-ST-ZIP MARIANNA FL 32448

TITLE **T** ☒ Delete
NAME BOOKER, LARRY
STREET ADDRESS 3407 HWY 90
CITY-ST-ZIP MARIANNA FL 32447

TITLE **S** ☐ Delete
NAME BERNARD, GEORGE L
STREET ADDRESS 165 HOLLAND STREET
CITY-ST-ZIP SLOCOMB AL 36375

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME **SLOAN, David**
STREET ADDRESS **1874 Tobe Lane**
CITY-ST-ZIP **Marianna, FL 32448**

TITLE ☒ Change ☐ Addition
NAME **Korosacz, Steve**
STREET ADDRESS **4391 Florence Drive**
CITY-ST-ZIP **Marianna, FL 32446**

TITLE ☒ Change ☐ Addition
NAME **Hayes, Jimmy**
STREET ADDRESS **4436 Hwy 71**
CITY-ST-ZIP **Greenwood, FL 32443**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

George L. Bernard
GEORGE L. BERNARD

21 APR 06

858-526-1026