

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766996

FILED
Jan 06, 2009
Secretary of State

Entity Name: PORT ST. LUCIE LODGE NO. 513, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

101 NW MARION AVE.
PORT ST. LUCIE, FL 34983 US

New Principal Place of Business:

Current Mailing Address:

101 NW MARION AVE.
PORT ST. LUCIE, FL 34983 US

New Mailing Address:

FEI Number: 59-2237763 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARINELLI, RICHARD
Address: 3427 SW BEVIL AVE
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: D () Delete
Name: MARTIN, RICHARD
Address: 4706 BUCANAN DR
City-St-Zip: PORT SAINT LUCIE, FL 34982

Title: M () Delete
Name: HEADLEY, KEITH W
Address: 1105 SW KHAN DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: P () Delete
Name: GAINER, MICHAEL
Address: 773 NE EASTLAKE ST
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: T () Delete
Name: BARNABEI, ALBERT
Address: 8488 GALBERRY CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH W HEADLEY

Electronic Signature of Signing Officer or Director

SECE

01/06/2009

_____ Date