

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768487

FILED
Apr 22, 2009
Secretary of State

Entity Name: FORT MYERS BEACH LODGE NO. 964, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

19090 SAN CARLOS BLVD
FORT MYERS BEACH, FL 33931 US

New Principal Place of Business:

Current Mailing Address:

19090 SAN CARLOS BLVD
FORT MYERS BEACH, FL 33931 US

New Mailing Address:

FEI Number: 59-2257581

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: P/D () Delete
Name: KOSINSKI, JOSEPH
Address: 135 GULFVIEW AVE
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: V/D () Delete
Name: BERRY, NELSON
Address: 15588 BEACHCOMBER AVE
City-St-Zip: FORT MYERS, FL 33908 US

Title: MS () Delete
Name: CONNER, ED
Address: 8373 SOUTHWIND CIR
City-St-Zip: FORT MYERS, FL 33908 US

Title: D () Delete
Name: FOGEL, LARRY
Address: 129 MAIN ST
City-St-Zip: FORT MYERS BEACH, FL 33931 US

Title: D () Delete
Name: MEINKE, JIM
Address: 18404 CUTLASS DR
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D () Delete
Name: JAY, JOHN
Address: 1655 SAN CARLOS BLVD
City-St-Zip: FORT MYERS, FL 33908

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
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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: JAMES A. MEINKE

PG

04/22/2009

Electronic Signature of Signing Officer or Director

Date