## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N0000002693

MURDOCK LODGE NO. 2554, LOYAL ORDER OF MOOSE, IN

**FILED** 

08-15-2003 90087 022 \*\*\*\*61.25

Aug 15, 2003 8:00 am secretary of State

Principal Place of Business 4212 N. ACCESS RD. UNITX C & D ENGLEWOOD FL 34223			Mailing Address P O BOX 281 ENGLEWOOD FL 34295-0281			 	151 B B\$11 BB113 BB111 BB\$11 BB118 1		
2. Principal F	Place of Business	<b>3.</b> Mai	ling Address		· <del></del>			<b>1</b> 110 (1010 (1110 )	
Suite, Apt. #, etc.		Su	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		Cit	City & State			4. FEI Number 91-2029762 Applied For Not Applicable			
Zip	Country	Zip	)	Country		5. Certificate of St	atus Desired	\$8.75 Add	
6. Name and Address of Current Registe			Agent			7. Name and Address of New Registered Agent			
			<del></del>	Name	•				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			1		Street Address (P.O. Box Number is Not Acceptable)				
PLANTA	ΠΟΝ FL 33324			City			F	Zip Cod	le
the obligat	e named entity submits this tions of registered agent.	statement for the purp	ose of changing its r	registered office	or register	ed agent, or both, in			and accept
SIGNATURE	Signature, typed or printed name of	registered agent and title if app	licable. (NOTE:	: Registered Agent sig	nature required	when reinstating)	DATE	· · · · · · · · · · · · · · · · · · ·	
FILE NOW: FEE IS \$61.25 After September 10, 2003, min will be \$236.25			9. Election Campaign Financing Trust Fund Contribution.						
	· · · · · · · · · · · · · · · · · · ·				´ —	\$5.00 May Be Added to Fees	Make Cheo Florida Depa		
After Sept	tember 10, 2003, min	will be \$236.25				Added to Fees	Florida Depa	rtment of S	State
	OFFICE PD SPISAK, DANIEL 1425 CORLES DR.	will be \$236.25 ERS AND DIRECTORS		ontribution.		Added to Fees		rtment of S	State
10. TITLE NAME STREET ADDRESS	OFFICE PD SPISAK, DANIEL	will be \$236.25  ERS AND DIRECTORS  23-3507	Trust Fund Co	11. TITLE NAME STREET ADDRES	S VP Bre	Added to Fees  ADDITIONS/CHANGE  NEMAN, P	Florida Depa	rtment of S  IRECTORS IN  Change	State
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD SPISAK, DANIEL 1425 CORLES DR. ENGLEWOOD FL 3422 VD KUBALSKI, JERRY 3737 EL JO BEAN RD	will be \$236.25  ERS AND DIRECTORS  23-3507  NE	Trust Fund Co	TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES	VP Bres Port Sec Coop 938	neman, Ponale of Clamper	Florida Depa ES TO OFFICERS AND E buy Licher 1, Fl. 33981-3	rtment of S  IRECTORS IN  Change	I 10 Addition
After Septing  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	PD SPISAK, DANIEL 1425 CORLES DR. ENGLEWOOD FL 3422 VD KUBALSKI, JERRY 3737 EL JO BEAN RD PT. CHARLOTTE FL 3 S MEYERS, KENNETH 22 WHITE MARSH LA	will be \$236.25  ERS AND DIRECTORS  23-3507	Trust Fund Co	TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES TITLE NAME STREET ADDRES STREET ADDRES	VP Brescher Sec Coo Seng Tres.	neman, Por Charlette  per, Donald  lewood, Fl  nemer, Wo	Florida Depa ESTO OFFICERS AND E Circle J.F. 33981-3 J.R. Aue 34224	rtment of S  IRECTORS IN  Change	Addition
After Sept  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	PD SPISAK, DANIEL 1425 CORLES DR. ENGLEWOOD FL 3422 VD KUBALSKI, JERRY 3737 EL JO BEAN RD PT. CHARLOTTE FL 3 S MEYERS, KENNETH 22 WHITE MARSH LAI ROTONDA WEST FL 3 T COURVAL, JEAN 642 VERONA STREET	will be \$236.25  ERS AND DIRECTORS  23-3507	Trust Fund Co	TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES STREET ADDRES	S VP e S Port S C P e S	neman, A Conactette per, Donald Delicamp Lewood, Fl nemer, Wood Lewood, Fl	Florida Depa ESTO OFFICERS AND D CINCLE 4F1-33981-3 1R. AUE 34224 2lter L. 34224 Len Rd-F4	change  Change  Change	I 10 Addition Addition

Port Charlotte, FI 12. 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 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.

CITY-ST-ZIP

STREET ADDRESS 21138

SIGNATURE: //

12307 LAMONTIER DRIVE

**PUNTA GORDA FL 33955** 

STREET ADDRESS

CITY-ST-ZIP