

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000003808

1. Entity Name

AZALEA PARK LODGE NO. 2591, LOYAL ORDER OF MOOSE INC.



FILED
May 12, 2003 8:00 am
Secretary of State

05-12-2003 90207 003 ****70.00

Principal Place of Business

221 CURRY FORD ROAD
ORLANDO FL 32822

Mailing Address

7221 CURRY FORD ROAD
ORLANDO FL 32822

2. Principal Place of Business

Suite, Apt. #, etc.

ORLANDO, FLORIDA

City & State

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

32822

Country

USA

Zip

Country

4. FEI Number 91-2112924

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES INC.
3953 WW KELLY RD
TALLAHASSEE FL 32311

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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 S
NAME SCHLICKMANN, FRED A
STREET ADDRESS 7105 LAKE UNDERHILL ROAD
CITY-ST-ZIP ORLANDO FL 32822 ☐ Delete

TITLE D
NAME STROM, ALLAN W
STREET ADDRESS 7105 LAKE UNDERHILL DR
CITY-ST-ZIP ORLANDO FL ☒ Delete

TITLE P
NAME SHEDD, CHARLES
STREET ADDRESS 7101 SPOONFOOT STREET
CITY-ST-ZIP ORLANDO FL 32822 ☒ Delete

TITLE D
NAME MARSH, DONALD
STREET ADDRESS 8197 NEWCOMER LANE
CITY-ST-ZIP ORLANDO FL 32825-5252 ☒ Delete

TITLE D
NAME STROM, ALLAN
STREET ADDRESS 2641 AUTUMN GREEN DRIVE
CITY-ST-ZIP ORLANDO FL 32822 ☒ Delete

TITLE V
NAME CARR, MICHAEL
STREET ADDRESS 725 ENSENADE DRIVE
CITY-ST-ZIP ORLANDO FL 32825 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME EDWARD A. CAMPBELL
STREET ADDRESS 8117 ELSEE DR.
CITY-ST-ZIP ORLANDO, FL. 32822 ☒ Change ☐ Addition

TITLE
NAME RONALD GOARELL
STREET ADDRESS 6590 HOFFNER AVE
CITY-ST-ZIP ORLANDO, FL 32822 ☒ Change ☐ Addition

TITLE
NAME DAVID A DUBE
STREET ADDRESS 7322 LUAN DRIVE
CITY-ST-ZIP ORLANDO, FL 32822 ☒ Change ☐ Addition

TITLE
NAME BILL EUBANKS
STREET ADDRESS 531 HARRELL DR.
CITY-ST-ZIP ORLANDO, FL 32828 ☒ Change ☐ Addition

TITLE
NAME EDWARD L. CAMPBELL
STREET ADDRESS 8117 ELSEE DR.
CITY-ST-ZIP ORLANDO, FL 32822 ☒ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ADMINISTRATOR
SECRETARY -

4/28/03

407/207-4514