

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01200

FILED
Apr 28, 2009
Secretary of State

Entity Name: NORTH PORT LODGE NO. 764, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business:

14156 TAMIAMI TRAIL
NORTH PORT, FL 342872209 US

New Principal Place of Business:

Current Mailing Address:

14156 TAMIAMI TRAIL
NORTH PORT, FL 342872209 US

New Mailing Address:

FEI Number: 59-2363059

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: SD () Delete
Name: CLEGG, VIRGIL
Address: 6028 PAN AMERICAN BLVD
City-St-Zip: NORTH PORT, FL 34287

Title: T () Delete
Name: RUBIN, DAVID E
Address: 1100 EPPINGER DR
City-St-Zip: NORTH PORT, FL 34287

Title: P () Delete
Name: HEDRICK, PAUL
Address: 526 BERTHOUD ST.
City-St-Zip: PORT CHARLOTTE, FL 339531812

Title: D () Delete
Name: DARLING, MARK
Address: 6426 HAELE CT
City-St-Zip: NORTH PORT, FL 34287

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:

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: VIRGIL CLEGG

ADM.

04/28/2009

Electronic Signature of Signing Officer or Director

Date