

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007049

FILED  
Apr 11, 2012  
Secretary of State

**Entity Name:** ST. JOHN'S RIVER MOOSE LEGION NO. 227, INCORPORATED

**Current Principal Place of Business:**

96 DIRKSEN DR  
DEBARY, FL 32713

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 531023  
DEBARY, FL 32753

**New Mailing Address:**

**FEI Number:** 20-8926769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: GOODWIN, EVERETT  
Address: 317 FAULKNER ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D  
Name: CAIME, AL  
Address: 800 RIO ALA MANO DR  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DS  
Name: BRADSHAW, KEITH  
Address: 96 DIRKSEN DR  
City-St-Zip: DEBARY, FL 32713

Title: D  
Name: WHEELER, DAVID  
Address: 2 COLUMBINE TRL  
City-St-Zip: DEBARY, FL 32713

Title: D  
Name: BAKER, BOBBY  
Address: P O BOX 390091  
City-St-Zip: DELTONA, FL 32739

Title: DT  
Name: CORP, PAUL  
Address: 111 CHERRYWOOD GARDENS DR  
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

SIGNATURE: KEITH BRADSHAW

SEC

04/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date