2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2008 8:00 am
Secretary of State
04-22-2008 90024 040 ****61.25

DOCUMENT # N20188

1. Entity Name

INDIAN RIVER LODGE NO. 2304 LOYAL ORDER OF MOOSE, INC.

Principal Place of Business	Mailing Address
3550 S. WASHINGTON AVENUE SUITE 3 TITUSVILLE FL 32780 US	3550 S. WASHINGTON AVE SUITE 3 TITUSVILLE FL 32780 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1829 RIVERSIDE DRIVE	1829 RIVERSIDE DRIVE
Suite, Apt. #, etc.: LOUNGE	Suite, Apt. #, etc.: LOUNGE
City & State: TITUSVILLE, FLORIDA	City & State: TITUSVILLE, FLA
Zip: 32780 Country: U.S	Zip: 32780 Country: U.S

4. FEI Number: 59-2862085 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AD-D HILL, EDWARD 3550 S. WASHINGTON AVE TITUSVILLE FL 32780	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GP CHAGNON, MARTIN 1740 COWAN DRIVE TITUSVILLE FL 32796	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V YANKO, GARY 566 ADOBE AVE COCOA FL 32729	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BROWN, CHESTER 4700 BARNA TITUSVILLE FL 32780	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR TODD, JOHN 1802 FIG TREE TITUSVILLE FL 32780	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VACANT	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR LAKE, JERRY 290 ALABAMA MERRITT ISLAND FL 32756	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Diane Ruggi Andersen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #