

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Motham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N32227 (3)

1. Corporation Name

NASSAU LODGE NO. 2352 LOYAL ORDER OF MOOSE, INC.

Principal Place of Business

836 US 17 SOUTH
P.O. BOX 1073
YULEE FL 32097

Mailing Address

836 US 17 SOUTH
P.O. BOX 1073
YULEE FL 32097



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

05/10/1989

3a. Date of Last Report

02/06/1995

4. FEI Number

59-2939513

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

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

83 000001886300
-07/08/96--01054--027

84 City

***70.00

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | DELETE |
|-------|---------------------|---------------------|-------------|--------------------------|
| DP | SLUDER, LUTHER R | P.O. BOX 711 N/A | YULEE FL | <input type="checkbox"/> |
| D | DODD, JOE | P.O. BOX 963 N/A | YULEE FL | <input type="checkbox"/> |
| DV | MCGREGOR, TOM | 2152 ELISE RD. W. | YULEE FL | <input type="checkbox"/> |
| D | HATFIELD, TIMOTHY S | P.O. BOX 1297 N/A | YULEE FL | <input type="checkbox"/> |
| DS | SELY, F. V JR | 1772 WILSON NECK RD | YULEE FL | <input type="checkbox"/> |
| DT | GRANT, REGINALD D | 90 MOSS OAK DR | YULEE FL | <input type="checkbox"/> |

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | Change | Addition |
|-----------|------------------|--------------------|-----------------|-------------------------------------|--------------------------|
| DS | Luther R. Sluder | P.O. Box 711 N/A | Yulee, FL 32097 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| DP | Brian Hesseraner | P.O. Box 1749 N/A | Yulee, FL 32097 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| DV | Serry Baugus | 1928 Tanya Rd | Yulee, FL 32097 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D | EARL Dietz | 251 Cardinal St. | Yulee, FL 32097 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D | Mike Ireland | P.O. Box 894 N/A | Yulee, FL 32097 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D | John Rose | 944 Lindsey Kn Ct. | Yulee, FL 32097 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: LUTHER R. SLUDER 6/4/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-12-96 225-5461
Date Daytime Phone #

CR2E037 (3/96)