

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46621

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** CALOOSAHATCHEE LODGE NO. 2395, LOYAL ORDER OF MOOSE, INC.

**Current Principal Place of Business:**

419 E. CAPE CORAL PKWY  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

419 E. CAPE CORAL PKWY  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 65-0306216

**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:** GOV  
**Name:** BERGAU, GEORGE GOVERNO  
**Address:** 1502 SW 50TH ST, #502  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** TR  
**Name:** BARTLETT, JOHN PRELATE  
**Address:** 1244 SW 53RD TERR  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** TRUS  
**Name:** PEET, DON TRUSTEE  
**Address:** 419 CAPE CORAL PARKWAY, E  
**City-St-Zip:** CAPE CORAL, FL 33904

**Title:** ADMI  
**Name:** ADKINSON, WALLACE H ADMINIS  
**Address:** 1424 SE 4TH ST  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** TRUS  
**Name:** TOM RIDER, KURT TRUSTEE  
**Address:** 2528 SW 36TH LANE  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** JR.  
**Name:** GELL, CHRIS JR. GOV  
**Address:** 409 SW 41ST ST  
**City-St-Zip:** CAPE CORAL, FL 33914

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:** WALLACE H. ADKINSON

ADMI

04/08/2011

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

\_\_\_\_\_  
Date