

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 14, 2007 8:00 am**  
**Secretary of State**

05-14-2007 90085 013 \*\*\*\*61.25

<b>DOCUMENT # N93000005354</b>					
<b>1. Entity Name</b> BUCK HEAD RIDGE LODGE NO. 2417, LOYAL ORDER OF MOOSE, INC.					
<b>Principal Place of Business</b> 2 LINDA RD. OKEECHOBEE, FL 34974			<b>Mailing Address</b> 2 LINDA RD. BHR OKEECHOBEE, FL 34974		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<b>6. Name and Address of Current Registered Agent</b>  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			<b>7. Name and Address of New Registered Agent</b> Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> Zip Code _____		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	ADM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DAVIS, RICHARD		NAME	DARLING, CHARLES	
STREET ADDRESS	17 LINDA GARDEN RD. BHR		STREET ADDRESS	8344 MYAKKA CT	
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	GOV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BOOTH, STEPHEN		NAME	DAVIS, RICHARD	
STREET ADDRESS	30 6TH ST		STREET ADDRESS	17 LINDA GARDENS RD	
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP	OKEECHOBEE, FL 34974	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	JRG	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NYE, MICHAEL		NAME	DIMMIT, REX	
STREET ADDRESS	3 2ND ST. BHR		STREET ADDRESS	30 LIME ST	
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP	OKEECHOBEE, FL 34974	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	TRF	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARGIS, ED		NAME	BONI, JOHNATHEN	
STREET ADDRESS	3026 SE 36TH AVE		STREET ADDRESS	42 LAKE DR	
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP	OKEECHOBEE, FL 34974	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	PRELATE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BOB, IMMEL		NAME	SCHRECONGOST, DON	
STREET ADDRESS	59 BREAM AVE BHR		STREET ADDRESS	22 9TH ST, BHR	
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP	OKEECHOBEE, FL 34974	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	TRUSTEE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PAUL, MURPHY		NAME	HARGIS, KYLE	
STREET ADDRESS	41 LINDA RD BHR		STREET ADDRESS	3026 S.E. 36 AVE	
CITY-ST-ZIP	OKEECHOBEE, FL 34974		CITY-ST-ZIP	OKEECHOBEE, FL 34974	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b>					
<b>SIGNATURE:</b> <u>Richard Davis</u> <b>RICHARD DAVIS</b> 04/30/07					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

(863) 763-2250