2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000793

FILED Feb 01, 2008 Secretary of State

Entity Name: INDIAN RIVER MOOSE LEGION NO. 178, INC.

Current Principal Place of Business: New Principal Place of Business:

924 TIMOR AVE 5001 NORTH O.B.T.

ORLANDO, FL 328604 ORLANDO, FL 32810 US US

Current Mailing Address: New Mailing Address:

P.O. BOX 607865

ORLANDO, FL 32860 US

FEI Number: 23-7395688 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MILLWATER, EDWARD K O'NEAL, DAN C Name: Name: 924 TIMOR AVE Address: 211 MARGARET RD Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: SANFORD, FL 32771

Title: Title: (X) Change () Addition () Delete

BRADSHAW, JKEITH Name: HAINES, RICHARD Name: Address: 97 DIRKSEN RD Address: 3049 SLED RD City-St-Zip: DEBARY, FL 32713 City-St-Zip: CHRISTMAS, FL 32709

Title: () Delete Title:

() Change () Addition RYAN, EDWARD T Name: Name:

15695 EAST COLONIAL DR. Address: Address: City-St-Zip: ORLANDO, FL 32820 City-St-Zip:

Title: () Delete Title: D (X) Change () Addition

DUFRANE, JOHN J ELICK, JOE Name: Name: Address: 770 LAKE KATHYN Address: 3302 CALLOWAY DR City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: ORLANDO, FL 32810

Title: () Delete Title: () Change () Addition

PAYNE, OTMER R Name: Name: 4514 LA VISTA DR Address: Address: City-St-Zip: ORLANDO, FL 328081908 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

HAYSTEAD, JOHN JONES, RICHARD Name: Name: 5010 APOLLO AVE Address: Address: 4445 STONEMEADOW SAINT CLOUD, FL 347739411 ORLANDO, FL 32826 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAN O'NEAL PD 02/01/2008