

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

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90037 004 ****61.25

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1. Entity Name

MANATEE MOOSE LEGION NO. 58, INC.



Principal Place of Business

11 NE PINE ISLAND RD
CAPE CORAL FL 33909-2559

Mailing Address

17100 TAMIAMI TRAIL, #198
PUNTA GORDA FL 33955



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number
59-1662487

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

CT CORPORATION SYSTEM
17100 TAMIAMI TRAIL
#198
PUNTA GORDA FL 33955

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

Signature, typed or printed name of registered agent and the filer, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE	SD	☐ Delete
NAME	WILLIN, ROBERT F	
STREET ADDRESS	5698 INVERNESS CIR	
CITY-STATE-ZIP	N FT MYERS FL	
TITLE	PAST. PRES.	☐ Delete
NAME	BERGAU, GEORGE J	
STREET ADDRESS	1502 S.W. 50 ST. UNIT 302	
CITY-STATE-ZIP	CAPE CORAL FL 33714	
TITLE	D	☐ Delete
NAME	VAN NOSTRAND, FRED J	
STREET ADDRESS	29430 PINE VILLA CIR	
CITY-STATE-ZIP	PUNTA GORDA FL 33982	
TITLE	D	☒ Delete
NAME	GSWARTLE, GLENN	
STREET ADDRESS	18122 SANDY PINE CIR	
CITY-STATE-ZIP	N. FT. MYERS FL 33917	
TITLE	PR. PRESIDENT	☐ Delete
NAME	PARKER, CHARLES	
STREET ADDRESS	805 E 5 ST.	
CITY-STATE-ZIP	ENGLEWOOD FL 34223	
TITLE	WALTER WALWORTH	☐ Delete
NAME	PO BOX 110071	
STREET ADDRESS	NAPLES FL 34108	
CITY-STATE-ZIP	D.R.	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	AIR.	☐ Change ☐ Addition
NAME	ANTHONY VALDES	
STREET ADDRESS	9641 STRIKE LANE	
CITY-STATE-ZIP	BONITA SPRINGS FL 34135	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

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 or without the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.26.08

941-347-8314