2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
10 MAY 17 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002811

1. Entity Name
MANATEE MOOSE LEGION NO. 58, INC.

Principal Place of Business	Mailing Address
17100 TAMIAMI TRAIL 198 PUNTA GORDA, FL 33955	17100 TAMIAMI TRAIL, #198 PUNTA GORDA, FL 33955

05072010 Chg-NP CR2E037 (11/08)

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

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
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 24, 2010

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WILLIN, ROBERT F 17100 TAMIAMI TRAIL #198 PUNTA GORDA, FL 33955	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR FRED GRUENG 5237-1 CODARBEND DR. FT. MYERS FL, 33919 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PP BERGAU, GEORGE J 1502 S.W. 50 ST. UNIT 302 CAPE CORAL, FL 33714	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	400180635824 05/10/10--01002--011 **61.25 400180 635824 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VAN NOSTRAND, FRED J 29430 PINE VILLA CIR PUNTA GORDA, FL 33982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR DOUGLAS SWINAMER 19967 MIDWAY BLVD PORT CHARLOTTE FL, 33948 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GSWARTLE, GLENN 18122 SANDY PINE CIR N. FT. MYERS, FL 33917	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT WALTER WALWORTH ~~5220~~ 4661- 7AVE. SW NAPLES, FL. 34119 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PP~~ P PARKER, CHARLES 805 E 5 ST. ENGLEWOOD, FL 34223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	5/17 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALDES, ANTHONY 9641 STRIKE LANE BONITA SPRINGS, FL 34135	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: Robert D Willin 5. 10 941.347.8314
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #