

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 25, 2008  
Secretary of State

DOCUMENT# N94000003046

Entity Name: SEMINOLE MOOSE LEGION NO. 81, INC.

**Current Principal Place of Business:**

8654 DELLBRIDGE CT.  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

8654 DELLBRIDGE CT.  
JACKSONVILLE, FL 32244

**New Mailing Address:**

FEI Number: 23-7134036      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: P ( ) Delete  
Name: BUTNER, ESTEL A  
Address: 5546 KEYSTONE DRIVE NORTH  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP ( ) Delete  
Name: CAVOORES, TED G  
Address: 9764 SUMMER GROVE WAY WEST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD ( ) Delete  
Name: NORRIS, WILLIAM B  
Address: 8654 DELLBRIDGE CT.  
City-St-Zip: JACKSONVILLE, FL 322744

Title: C ( ) Delete  
Name: FOX, ROBERT  
Address: 7290 HONDA DR.  
City-St-Zip: JACKSONVILLE, FL 3222-2012

Title: FD ( ) Delete  
Name: GERHARDT, ROBERT SR.  
Address: PO BOX 1665  
City-St-Zip: LAKE CITY, FL 32056

Title: FD ( ) Delete  
Name: BARBER, CHARLES T  
Address: PO BOX 11  
City-St-Zip: MACCLENNY, FL 32063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CAVOORES, TED G  
Address: 9764 SUMMER GROVE WAY WEST  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP (X) Change ( ) Addition  
Name: GERHARDT, ROBERT SR.  
Address: P. O. BOX 1665  
City-St-Zip: LAKE CITY, FL 32056

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: C (X) Change ( ) Addition  
Name: WHITE, JAMES E SR  
Address: P.O.BOX 1701  
City-St-Zip: MIDDLEBURG, FL 32050

Title: FD (X) Change ( ) Addition  
Name: WALTON, DENNIS J  
Address: 3199 DIZZY LANE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WILLIAM B. NORRIS

Electronic Signature of Signing Officer or Director

SEC.

05/25/2008

\_\_\_\_\_ Date