2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004811

FILED Jan 24, 2009 Secretary of State

Entity Name: COUNTY LINE LODGE NO. 2427, LOYAL ORDER OF MOOSE, INC.

Current Principal Place of Business: New Principal Place of Business: 15695 EAST COLONIAL ORLANDO, FL 32820 **Current Mailing Address: New Mailing Address:** 15695 EAST COLONIAL ORLANDO, FL 32820 FEI Number: 59-3264396 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BELL, TOM Name: Name: 8743 GOPMER LANE Address: Address: City-St-Zip: ORLANDO, FL 32859 City-St-Zip: Title: Title: () Delete () Change () Addition YATES, RONALD Name: Name: Address: 339 RAWLET AVE Address: City-St-Zip: ORLANDO, FL 32833 City-St-Zip: Title: () Delete Title: (X) Change () Addition HETTINGER, ROBERT A Name: HETTINGER, ROBERT A Name: Address: 18528 2ND AVE Address: 18528 2ND AVE City-St-Zip: ORLANDO, FL 32820 City-St-Zip: ORLANDO, FL 32820 Title: () Delete Title: () Change () Addition Name: BREWINGTON, RONALD Name: 402 WELLON AVE Address: Address: City-St-Zip: ORLANDO, FL 32833 City-St-Zip: Title: () Delete Title: JG (X) Change () Addition BELL, TOM ROBERT, HALL Name: Name: 8743 GOPHER LANE 2267 PEBBLE BEACH BLVD Address: Address: ORLANDO, FL 32859 City-St-Zip: City-St-Zip: ORLANDO, FL 32826 Title: () Delete Title: (X) Change () Addition MELVIN, TROMANHAUSER SWIFT, DANA Name: Name: Address: 332 TIMBERWOOD TR Address: 827 SUNFLOWER TRAIL OVIEDO, FL 32765 ORLANDO, FL 32828 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: ROBERT HETTINGER ADM 01/24/2009