

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000005881 (6)

1. Corporation Name

PORT ORANGE LODGE NO. 2450, LOYAL ORDER OF MOOSE, INC.

Principal Place of Business

125 SE 25TH LANE
CAPE CORAL FL 33904

Mailing Address

125 SE 25TH LANE
CAPE CORAL FL 33904



3. Date Incorporated or Qualified
12/11/1995

3a. Date of Last Report
04-07-1995

2. Principal Place of Business
5660 So. Ridgewood Ave.

2a. Mailing Address
P.O. Box 290186

4. FEI Number
59-3348637

Applied For
Not Applicable

22. Suite, Apt. #, etc.
25

27. Suite, Apt. #, etc.
25

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23. City & State
Port Orange Florida

28. City & State
Port Orange Florida

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24. Zip
32127

Country
Volusia

29. Zip
32129-0186

30. Country
Volusia

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City

FL 85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Gene Self Secretary**

04-16-1996

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

Signature of registered agent (signature required when filing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE

NAME **RHODES, JAMES**
STREET ADDRESS **579 S GREENWAY DR**
CITY- ST- ZIP **PORT ORANGE FL 32127**

1.1 TITLE ☐ Change ☐ Addition

TITLE **VD** ☐ DELETE

NAME **SMITH, GEORGE**
STREET ADDRESS **800 WILDWOOD CT**
CITY- ST- ZIP **PORT ORANGE FL 32127**

1.2 NAME

TITLE **SD** ☒ DELETE

NAME **FARRELL, RICHARD**
STREET ADDRESS **723 PRISOL LN**
CITY- ST- ZIP **PORT ORANGE FL 32127**

1.3 STREET ADDRESS

TITLE **TD** ☒ DELETE

NAME **HAGLAND, ARTHUR**
STREET ADDRESS **858 VILLAGE TRAIL APT. #602**
CITY- ST- ZIP **PORT ORANGE FL 32127**

1.4 CITY- ST- ZIP

TITLE **D** ☒ DELETE

NAME **JENNINGS, ERWIN**
STREET ADDRESS **2323 ANASTASIA DR**
CITY- ST- ZIP **S. DAYTONA FL 32119**

2.1 TITLE ☐ Change ☐ Addition

TITLE **D** ☐ DELETE

NAME **NORTON, EDWARD**
STREET ADDRESS **5543 W BAYSHORE DR**
CITY- ST- ZIP **HARBOR OAKS FL 32127**

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

Secretary
Gene Self
246 Downing Dr.
Port Orange Florida 32119

Treasurer
Erwin (ed) Jennings
2323 Anastasia Dr.
South Daytona Florida 32119

Trustee
Walter Kohnken
5435 Orange Ave.
Port Orange Florida 32127

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Gene Self Secretary**

04-16-1996

904-760-3559

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)