

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006698

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: OCALA FOREST LODGE NO. 2535, LOYAL ORDER OF MOOSE, INC.

**Current Principal Place of Business:**

OCALA FOREST MOOSE 2535  
6485 SOUTH HWY 314A  
OCKLAWAHA, FL 32179

**New Principal Place of Business:**

**Current Mailing Address:**

6485 SOUTH HWY 314A  
OCKLAWAHA, FL 32179

**New Mailing Address:**

FEI Number: 91-1999070

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**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: TD ( ) Delete  
Name: ROGAL, TIMOTHY  
Address: 5255 96 LN RD.  
City-St-Zip: OCKLAWAHA, FL 32179

Title: PD ( ) Delete  
Name: DOUGLAS, GARCIA  
Address: 3033 NE LN 5TH RD.  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: VD ( ) Delete  
Name: HELLER, ROBERT  
Address: 6496 SE 168TH COURT  
City-St-Zip: OCKLAWAHA, FL 32179

Title: D ( ) Delete  
Name: WILLIAMS, ROGER  
Address: 591 FISHER RD.  
City-St-Zip: OCKLAWAHA, FL 32179

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

Title: TD (X) Change ( ) Addition  
Name: ROGAL, TIMOTHY  
Address: 16255 S 96 LN RD  
City-St-Zip: OCKLAWAHA, FL 32179

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

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

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: TIMOTHY ROGAL

ADMI

04/08/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date