

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724867

FILED
Apr 27, 2007
Secretary of State

Entity Name: SEBRING LODGE NO 2259 LOYAL ORDER OF MOOSE INC

Current Principal Place of Business:

11675 US 98
P. O. BOX 1685
SEBRING, FL 33871

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1685
SEBRING, FL 33871

New Mailing Address:

P.O. BOX 256
LORIDA, FL 33857

FEI Number: 59-1738641 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: ADD () Delete
Name: JOHNSTON, EDWIN
Address: 424 MAPLE LANE
City-St-Zip: SEBRING, FL 33876

Title: TD () Delete
Name: LONG, THOMAS
Address: 408 GRANADA CT
City-St-Zip: SEBRING, FL 33876

Title: GD () Delete
Name: MARBLE, LLOYD
Address: 505 N LAKE DR
City-St-Zip: SEBRING, FL 33857

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: GOV (X) Change () Addition
Name: JOHNSTON, EDWIN
Address: 424 MAPLE LANE
City-St-Zip: SEBRING, FL 33876

Title: TD (X) Change () Addition
Name: DELONG, ROBERT
Address: 1900 VARSITY TERRACE
City-St-Zip: LORIDA, FL 33857

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: EDWIN JOHNSTON

GOV

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date