

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728158

**FILED**  
**Mar 29, 2022**  
**Secretary of State**  
**1921033952CC**

**Entity Name:** PANAMA CITY, FLORIDA LODGE NO. 1389 LOYAL ORDER OF MOOSE, INCORPORATED

**Current Principal Place of Business:**

739 E 24TH PLAZA  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

P.O. BOX 299  
LYNN HAVEN, FL 32444 US

**FEI Number: 23-7520564**

**Certificate of Status Desired: No**

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

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

**Officer/Director Detail :**

Title           PRESIDENT  
Name           DAVIS, WILLIAM MIKE  
Address       739 E 24TH PLAZA  
                  P.O. BOX 299  
City-State-Zip: LYNN HAVEN FL 32444

Title           VP  
Name           STINSON, TRAVIS  
Address       739 E 24TH PLAZA  
City-State-Zip: LYNN HAVEN FL 32444

Title           TREASURER  
Name           ANDERSON, MERCEDES  
Address       739 E.24TH PLAZA  
City-State-Zip: PANAMA CITY FL 32405

Title           CHAPLAIN  
Name           ANDERSON, JULIE  
Address       739 E. 24TH PLAZA  
                  PO BOX 299  
City-State-Zip: PANAMA CITY FL 32405

Title           ADMINISTRATOR  
Name           ANDERSON, TODD  
Address       739 E 24TH PLAZA  
City-State-Zip: PANAMA CITY FL 32405

*I hereby 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 all other like empowered.*

**SIGNATURE: TODD ANDERSON**

**ADMINISTRATOR**

**03/29/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date