

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768851

Entity Name: FOUR TOWNES LODGE NO. 655, LOYAL ORDER OF MOOSE, INC.**FILED**
Jun 29, 2020
Secretary of State
0256413602CC**Current Principal Place of Business:**201 BENSON JCT RD.
DEBARY, FL 32713**Current Mailing Address:**P.O. BOX 531023
DEBARY, FL 32753-1023**FEI Number: 59-2265204****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 SECRETARY
Name CREERON, DANIEL
Address 1887 VIKING AVE
City-State-Zip: DELTONA FL 32725Title PRESIDENT
Name SHINDLE, DENNIS
Address 29 DAROSA AVENUE
City-State-Zip: DEBARY FL 32713Title VP
Name KEN, CARVELLI
Address 1205 BEACHDALE CT
City-State-Zip: DELTONA FL 32725Title DIRECTOR
Name EDKIN, MICHAEL
Address 2049 HEATHWOOD AVE
City-State-Zip: DELTONA FL 32725Title TREASURER
Name TIMOTHY, COOPER
Address 1890 PALMETTO RD
City-State-Zip: DELAND FL 32724

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: DANIEL CREERON**SECRETARY****06/29/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date