

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007370

**Entity Name:** NORTH HILLSBORO LODGE NO. 1741, LOYAL ORDER OF MOOSE, INC.

**FILED**  
**May 01, 2023**  
**Secretary of State**  
**8600864594CC**

**Current Principal Place of Business:**

8908 LAKE SUNSET DRIVE  
TAMPA, FL 33625

**Current Mailing Address:**

8908 LAKE SUNSET DRIVE  
TAMPA, FL 33625

**FEI Number: 59-1583367**

**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	A
Name	WEGLARZ, LAWRENCE P ADMINISTRATOR
Address	11212 MOULTRIE PLACE
City-State-Zip:	TAMPA FL 33625
Title	TRES
Name	THORPE SR, MICHAEL TREASURER
Address	9107 OTTER PASS
City-State-Zip:	TAMPA FL 33626

Title	PRESIDENT
Name	MCKENNA, JOSEPH GOV
Address	13031 ROYAL GEORGE AVE
City-State-Zip:	ODESSA FL 33556
Title	VP
Name	WHYEL, SAMUEL J
Address	12710 SADDLE CLUB CIR
City-State-Zip:	TAMPA FL 33635

*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: LAWRENCE WEGLARZ**

**ADMINISTRATOR**

**05/01/2023**

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

\_\_\_\_\_  
Date