

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # 715290 (3)

1. Corporation Name

EDISON CENTER INTERNATIONAL FREE AND ACCEPTED MO
DERN MASONS AND EASTERN STARS, INCORPORATED

95 MAY 16 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3011 N.W. 171ST STREET
MIAMI FL 33056

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MIAMI FL 33056

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/19/1968

3a. Date of Last Report

04/18/1994

4. FEI Number

23-0809780

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 5598 N.W. 7th Ave

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

Miami, Florida

27 City & State

Zip Country

24 33127

25 U.S.

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANER, HOMER, W
4411 NW 71st TERR
MIAMI FL 33055

81 Name

Frances Simmons

82 Street Address (P.O. Box Number is Not Acceptable)

3125 N.W. 42nd Street

83

84 City

Miami

FL

85 Zip Code

33142

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Frances Simmons

Frances Simmons

5-5-95

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD

NAME HAMILTON, THOMAS

STREET ADDRESS 3011 N.W. 171ST STREET

CITY - ST - ZIP MIAMI FL

TITLE D

NAME DAVIS, ST

STREET ADDRESS 9111 LITTLE RIVER BLVD

CITY - ST - ZIP MIAMI FL

TITLE VD

NAME WILLIAMS, OSIE

STREET ADDRESS 2525 NW 82ND ST

CITY - ST - ZIP MIAMI FL

TITLE S

NAME PITTS, MINNETTE ELAINE

STREET ADDRESS 15501 NE 6 AVE, #207D

CITY - ST - ZIP N MIAMI BCH. FL

TITLE T

NAME NELSON, RONALD

STREET ADDRESS 1087 NORTHWEST 61 STREET

CITY - ST - ZIP MIAMI FL 3312-7

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ronald Nelson

5 5 95

Signature and typed or printed name of signing officer or director

Date

Signature Number