2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2004 08:00 AM
Secretary of State

DOCUMENT # 715290

1. Entity Name
EDISON CENTER INTERNATIONAL FREE AND ACCEPTED MODERN MASONS AND EASTERN STARS, INCORPORATED

Principal Place of Business	Mailing Address
5598 N W 7TH AVE MIAMI, FL 33127 US	3011 N.W. 171ST STREET MIAMI, FL 33056

DO NOT WRITE IN THIS SPACE

01072004 No Chg-NP CR2E037 (10/03)

4. FEI Number
23-0809780
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SIMMONS, FRANCES
3125 N W 42ND STREET
MIAMI, FL 33142

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HAMILTON, THOMAS H.
STREET ADDRESS	3011 NW 171ST STREET
CITY-ST-ZIP	MIAMI, FL 33055
TITLE	D
NAME	DAVIS, S. T.
STREET ADDRESS	9111 LITTLE RIVER BLVD
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	MINCY, CHARLIE M.
STREET ADDRESS	20931 N.W. 34TH COURT
CITY-ST-ZIP	CAROL CITY, FL 33055
TITLE	D
NAME	PITTS, MINNETTE E
STREET ADDRESS	3720 S.W. 52ND AVENUE #107
CITY-ST-ZIP	PEMBROKE PARK, FL 33023
TITLE	VD
NAME	NELSON, RONALD
STREET ADDRESS	P. O. BOX 552330 N/A
CITY-ST-ZIP	CAROL CITY, FL 33055
TITLE	D
NAME	SIMMONS, FRANCES
STREET ADDRESS	3125 N.W. 42ND STREET
CITY-ST-ZIP	MIAMI, FL 33142

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01/16/04-80042-009 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas H Hamilton 1-10 04
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #