


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 10 1998 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **C10038** (3)

1. Corporation Name

SEBRING LODGE NO. 249 FREE AND ACCEPTED MASONS O F FLORIDA



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| Principal Place of Business ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE FL 32202 | Mailing Address ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE FL 32202 |
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| 3. Date Incorporated or Qualified 06/30/1992 | |
| 4. FEI Number 59-1651185 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

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| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 30 Country |
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| 9. Name and Address of Current Registered Agent SHEPPARD, ROY CONNOR 220 OCEAN STREET JACKSONVILLE FL 32202 | |
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| 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 Zip Code | |
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE **2/13/98**

| 12. OFFICERS AND DIRECTORS | |
|----------------------------|------------------------------|
| TITLE | WMD |
| NAME | HOWERTON, CLAUDIS F |
| STREET ADDRESS | 3317 LAKEVIEW DR |
| CITY-ST-ZIP | SEBRING FL 33870-6413 |
| TITLE | SWD |
| NAME | MORGAN, JONAS R SR |
| STREET ADDRESS | P O BOX 3900 N/A |
| CITY-ST-ZIP | SEBRING FL 33871-3900 |
| TITLE | JWD |
| NAME | DANIELS, WALTER B |
| STREET ADDRESS | 624 TASESCHEE DR |
| CITY-ST-ZIP | SEBRING FL 33870 |
| TITLE | TD |
| NAME | WAITE, F E |
| STREET ADDRESS | 4802 ORANGE BLVD |
| CITY-ST-ZIP | SEBRING FL 33870-5637 |
| TITLE | SD |
| NAME | NELSON, RONALD L |
| STREET ADDRESS | 1309 OAKWOOD DR |
| CITY-ST-ZIP | SEBRING FL 33870 |
| TITLE | DELETE |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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|---------------------|-------------------------------|
| 13. DIRECTORS IN 12 | |
| 1.1 TITLE | WORSHIPFUL MASTER (D) |
| 1.2 NAME | Jonas Randle Morgan Sr |
| 1.3 STREET ADDRESS | 1726 NW Lakeview Drive |
| 1.4 CITY-ST-ZIP | Sebring FL 33870 |
| 2.1 TITLE | SECRETARY (D) |
| 2.2 NAME | Ronald Louis Nelson |
| 2.3 STREET ADDRESS | 1309 Oakwood Dr |
| 2.4 CITY-ST-ZIP | Sebring FL 33870 |
| 3.1 TITLE | SENIOR WARDEN (D) |
| 3.2 NAME | Walter Blythe Daniels |
| 3.3 STREET ADDRESS | 624 Taseschee Dr |
| 3.4 CITY-ST-ZIP | Sebring FL 33870 |
| 4.1 TITLE | JUNIOR WARDEN (D) |
| 4.2 NAME | Barry Eugene Waite |
| 4.3 STREET ADDRESS | 2137 Sullivan St. |
| 4.4 CITY-ST-ZIP | Sebring FL 33872-6482 |
| 5.1 TITLE | TREASURER (D) |
| 5.2 NAME | F. Eugene Waite |
| 5.3 STREET ADDRESS | 4802 Orange Blvd |
| 5.4 CITY-ST-ZIP | Sebring FL 33870-5637 |
| 6.1 TITLE | |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **RONALD L NELSON**  3-6-98 941-385-3364

CR2E037 (10/97)