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Apr 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **C10068** (0)

1. Corporation Name

**AUBURNDAL LODGE NO. 135 FREE AND ACCEPTED MASON
S OF FLORIDA**

Principal Place of Business

**C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202
US**

Mailing Address

**C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202
US**

3. Date Incorporated or Qualified

06/30/1992

4. FEI Number

23-7526423

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEPPARD, ROY CONNOR
220 OCEAN ST
JACKSONVILLE FL 32202**

81 Name

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

83

City

FL

85 Zip Code

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

[Signature]

(NOTE: Registered Agent signature required when reinstating)

2/13/98

Signature of officer or director or printed name of registered agent and title if applicable

DATE

12. OFFICERS AND DIRECTORS

13. WORSHIPFUL MASTER (D) OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

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CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

1.1 TI Herman Eugene Mathews ☒ Change ☐ Addition

1.2 NA 3015 Reiter Drive ☒ Change ☐ Addition

1.3 ST Auburndale FL 33823 ☒ Change ☐ Addition

1.4 CI SECRETARY (D) ☒ Change ☐ Addition

2.1 TI Allen Paine Newcomb ☒ Change ☐ Addition

2.2 NA 433 Seawane Cir ☒ Change ☐ Addition

2.3 SI Auburndale FL 33823 ☒ Change ☐ Addition

2.4 C SENIOR WARDEN (D) ☒ Change ☐ Addition

3.1 TI Austin John Zechman ☒ Change ☐ Addition

3.2 NA 529 Lazy Lake Dr. ☒ Change ☐ Addition

3.3 SI Lakeland FL 33801 ☒ Change ☐ Addition

3.4 C JUNIOR WARDEN (D) ☒ Change ☐ Addition

4.1 TI Henry Khar Deen ☒ Change ☐ Addition

4.2 PO Box 2182 N/A ☒ Change ☐ Addition

4.3 Auburndale FL 33823-6182 ☒ Change ☐ Addition

4.4 C TREASURER (D) ☒ Change ☐ Addition

5.1 TI Alestius Theodore Miller ☒ Change ☐ Addition

5.2 NA 209 Elmer St ☒ Change ☐ Addition

5.3 ST Auburndale FL 33823-2508 ☒ Change ☐ Addition

5.4 CI ☐ Change ☐ Addition

6.1 TI ☐ Change ☐ Addition

6.2 NA ☐ Change ☐ Addition

6.3 STREET ADDRESS ☐ Change ☐ Addition

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 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 or on an attachment with an address.

SIGNATURE:

[Signature] **Allen P. Newcomb** 3/2/98 241 294-2812

SIGNATURE AND TYPE, AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 00000000

CR2E037 (10/97)