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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # C10072 (2)
1. Corporation Name
UNIVERSAL LODGE NO. 178 FREE AND ACCEPTED MASONS OF FLORIDA



Principal Place of Business Mailing Address
C/O ROY CONNOR SHEPPARD
220 OCEAN STREET
JACKSONVILLE FL 32202
US

3. Date Incorporated or Qualified 06/30/1992
3a. Date of Last Report 03/13/1996

2. Principal Place of Business 21
2a. Mailing Address 26
Suite, Apt. #, etc. 22
City & State 23
Zip 24 Country 25

4. FEI Number 59-1838921 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 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 is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 617.0503, Florida Statutes.

SIGNATURE [Signature] DATE 2-3-97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	WMD RIERA, GASTON 1305 TUSCOLA RD. CLEARWATER FL 34616	1.1 TITLE	WORSHIPFUL MASTER D
NAME		1.2 NAME	Vestal Vero Tatum
STREET ADDRESS		1.3 STREET ADDRESS	814 W Indiana Ave
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Tampa Fl 33603-4502
TITLE	SWD DIAZ, JOSE 23 SPANISH MAIN ST. TAMPA FL 33609-3534	2.1 TITLE	SENIOR WARDEN D
NAME		2.2 NAME	Max R Pena
STREET ADDRESS		2.3 STREET ADDRESS	8602 Chadwick
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Tampa Fl 33635
TITLE	JWD TAMAYO, MARIO RAMON 8212 SUNNYSLOPE DR. TAMPA FL 33615-2134	3.1 TITLE	JUNIOR WARDEN D
NAME		3.2 NAME	Rinaldo Ramon Castillo Jr
STREET ADDRESS		3.3 STREET ADDRESS	6613 Twelve Oak Blvd
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Tampa FL 33634
TITLE	TD PEREZ, BASILIO 6207 S. HAROLD AVE. TAMPA FL 33616-2308	4.1 TITLE	TREASURER D
NAME		4.2 NAME	Basilio Perez
STREET ADDRESS		4.3 STREET ADDRESS	6207 S Harold Ave
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Tampa Fl 33616-2308
TITLE	SD CALVO, CAMILO ANTHONY 1810 POLLOCK RD. LAKELAND FL 33813	5.1 TITLE	SECRETARY
NAME		5.2 NAME	RINALDO R. CASTILLO
STREET ADDRESS		5.3 STREET ADDRESS	6613 TWELVE OAKS BLVD.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	TAMPA, FL 33634
TITLE	SD RIERA, GASTON A. 1305 TUSCOLA ROAD CLEARWATER FL	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 if changed, or on an attachment with an address.

SIGNATURE: [Signature] Rinaldo Castillo DATE 2-21-97 813-886-3248
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone 0004324

CH2EUS/ (9/96)