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FILED
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



DOCUMENT # C10143 (1)
1. Corporation Name
DIXIE LODGE NO. 109, FREE AND ACCEPTED MASONS OF FLORIDA

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

3. Date Incorporated or Qualified: 06/30/1992
4. FEI Number: 59-1652886
Applied For: Not Applicable

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 220 Ocean St.
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27
City & State: 23 City & State: 28
Zip: 24 Country: 25 Zip: 29 Country: 30

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

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

10. Name and Address of New Registered Agent
81 Name:
82 Street Address (P.O. Box Number is Not Acceptable): 100002486161
83 -04/13/98--01018--026
84 City: ***5083.75 FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.150B, 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]* DATE: 2/13/98

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	FORD, STEPHEN LAMAR	
STREET ADDRESS	RT 1 BOX 144H	
CITY-ST-ZIP	BRISTOL FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MORRIS, JEFFREY SCOTT	
STREET ADDRESS	PO BOX 693 N/A	
CITY-ST-ZIP	BRISTOL FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MAYO, GREGORY ALLEN	
STREET ADDRESS	PO BOX 66 N/A	
CITY-ST-ZIP	CLARKSVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MAYO, JAMES CLIFFORD	
STREET ADDRESS	PO BOX 66 N/A	
CITY-ST-ZIP	CLARKSVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SHERROD, CHARLES GORDON	
STREET ADDRESS	RT 1 BOX 458A	
CITY-ST-ZIP	BLOUNTSTOWN FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	SHERROD, CHARLES GORDON	
STREET ADDRESS	RT 1 BOX 458A	
CITY-ST-ZIP	BLOUNTSTOWN FL	

13. OFFICERS AND DIRECTORS IN 12

1.1	WORSHIPFUL MASTER (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2	Jeffery Scott Morris	
1.3	P. O. Box 693 N/A	
1.4	Bristol FL 32321	
2.1	SECRETARY (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2	Freddie Lenton Glass	
2.3	208 Morningside Cir	
2.4	Blountstown FL 32424	
3.1	SENIOR WARDEN (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2	Gregory Allen Mayo	
3.3	1214 Maine Ave	
3.4	Lynn Haven FL 32444	
4.1	JUNIOR WARDEN (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2	Brigham Samuel Shuler	
4.3	Rt 3 Box 365	
4.4	Bristol FL 32321	
5.1	TREASURER (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2	James Clifford Mayo	
5.3	Po Box 66 N/A	
5.4	Clarksville FL 32430-0066	
6.1		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2		
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)(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]* DATE: 2/28/98
Daytime Phone # 904-354-2339

CR2E037 (10/97)