## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 16, 2004 8:00 am Secretary of State DOCUMENT # C10143 04-16-2004 90047 003 \*\*\*\*61.25 DIXIÉ LODGE NO. 109, FREE AND ACCEPTED MASONS OF FLORIDA Principal Place of Business Mailing Address 14003448 **ROY CONNOR SHEPPARD** ROY CONNOR SHEPPARD 220 OCEAN ST. 220 OCEAN ST. JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03052004 Chg-NP CR2E037 (10/03) City & State City & State FEI Number 59-1652886 Applied For Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHEPPARD, ROY CONNOR Street Address (P.O. Box Number is Not Acceptable) 220 OCEAN ST JACKSONVILLE, FL 32202 City Zip Code 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 Signature, typed or printed name of registered agent and title if explicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. WMD TITLE SENIOR WARDEN TITLE ☐ Delete (D) Change Addition DAVIS, JOHN T NAME NAME Robert Lee Thompson RTE 3 BOX 301F STREET ADDRESS . STREET ADDRESS Po Box 301 N/A CITY - ST-7IP BRISTOL, FL 32321 CITY-ST-7IP Bristol Fl 32321-0301 TITLE Delete TITLE JUNIOR WARDEN BATEMAN, JOSEPH B NAME NAME James Lloyd Killingsworth STREET ADDRESS P.O. BOX 747 STREET ADDRESS 12153 SW CR 275 CITY-ST-ZIP BRISTOL, FL 32321 CITY-ST-7IP 81ountstown FL 32424-5323 ger- Addition: TITLE Delete DUE NAME MCCLELLAN, HARRY H NAME SECRETARY 17518 NE TERESA TERR STREET ADDRESS STREET ADDRESS Joseph Brian Bateman BLOUNTSTOWN, FL 32424 CITY -ST-ZIP CITY-ST-7IP RTE i Box 228-C TITLE Delete TITLE BRISTOL FL 32321-9500 · □ Change MORRIS JR. CHARLES R NAME NAME STREET ADDRESS P O BOX 693 STREET ADDRESS CITY-ST-ZIP BRISTOL, FL 323210693 CITY-ST-ZIP TITLE Delete TITI F Change ☐ Addition BRAMBLETT, LESTER B NAME NAME

12. Thereby 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. Joseph B. Bateman, S.W.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY - ST - ZIP

TITLE

NAME

P.O. BOX 56

BRISTOL, FL 32321

IAME OF SIGNING OFFICER OR DIRECTOR

Delete

4-9-2104

**FILED** 

850 643 2403

Change

☐ Addition