

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2007 8:00 am**  
**Secretary of State**

03-13-2007 90015 021 \*\*\*\*61.25

40034830



01202007 Chg-NP CR2E037 (12/06)

4. FEI Number  
59-0383803

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SHEPPARD, ROY CONNOR  
220 OCEAN ST  
JACKSONVILLE, FL 32202

## 7. Name and Address of New Registered Agent

Name

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

City

FL

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 applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make check payable to**  
**Florida Department of State**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
COLLIER, JACK A  
12050 BRANDON LAKE RD  
JACKSONVILLE, FL 322585382 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
WMD  
AKERS, CAROL D  
13054 STAFFORDSHIRE DRIVE SOUTH  
JACKSONVILLE, FL 32225 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SWD  
PEEPLES, KEVIN J  
P.O. BOX 60236  
JACKSONVILLE, FL 32236 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
NOONEY, PATRICK R  
4396 GADSDEN COURT  
JACKSONVILLE, FL 32207 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET A  
CITY-ST-  
WORSHIPFUL MASTER (D) ☒ Change ☐ Addition  
Kevin Jay Peeples  
9187 Fish Rd  
Jacksonville FL 32220-1203

TIT  
NA  
STI  
CIT  
SENIOR WARDEN (D) ☒ Change ☐ Addition  
Patrick Regan Nooney  
3647 Jose Ter  
Jacksonville FL 32217-4718

TITLE  
NAME  
STREE  
CITY-  
JUNIOR WARDEN (D) ☐ Change ☒ Addition  
Gerald Scott Pantall  
12585 Bent Bay Trl  
Jacksonville FL 32224-5640

TIT  
NA  
STI  
CIT  
TREASURER (D) ☐ Change ☒ Addition  
Ralph Edward Dooley  
4740 Reed Ave  
Jacksonville FL 32257-6154

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: X

JACK A. COLLIER JACK A. COLLIER

MARCH 1, 2007

(904) 393-4649

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #