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Mar 10 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 # C10157 (1)

1. Corporation Name

ORLANDO LODGE NO. 69 FREE AND ACCEPTED MASONS OF  
FLORIDA

Principal Place of Business

Mailing Address

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

C/O ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE FL 32202-3218  
US



3. Date Incorporated or Qualified  
06/30/1992

3a. Date of Last Report  
03/13/1996

4. FEI Number  
23-7188525

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

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

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 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]*  
Signature of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-3-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	WMD	<input type="checkbox"/> DELETE
NAME	SMITH, JAMES L SR	
STREET ADDRESS	5616 CASTLE OAK CT.	
CITY-ST-ZIP	ORLANDO FL 32808-3405	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MOORE, WAYNE A	
STREET ADDRESS	325 RINGWOOD CIR	
CITY-ST-ZIP	WINTER SPRINGS FL 32708-4459	
TITLE	SWD	<input type="checkbox"/> DELETE
NAME	SIMONETTI, PETER A SR	
STREET ADDRESS	1123 HAWKES AVE.	
CITY-ST-ZIP	ORLANDO FL 32809-6321	
TITLE	JWD	<input type="checkbox"/> DELETE
NAME	JOHNSON, ROBERT E	
STREET ADDRESS	6457 ROCKINGTREE LANE	
CITY-ST-ZIP	ORLANDO FL 32819-4188	
TITLE	T	<input type="checkbox"/> DELETE
NAME	GENTRY, ROBERT H III	
STREET ADDRESS	5750 OAK HOLLOW LANE	
CITY-ST-ZIP	OVIEDO FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MOORE, WAYNE ARTHUR	
STREET ADDRESS	325 RINGWOOD CIRCLE	
CITY-ST-ZIP	WINTER SPRINGS FL	

1.1 TITLE	WORSHIPFUL MASTER D
1.2 NAME	Robert Eugene Johnson
1.3 STREET ADDRESS	6457 Rockingtree Lane
1.4 CITY-ST-ZIP	Orlando FL 32819-4188
2.1 TITLE	SENIOR WARDEN D
2.2 NAME	Kenneth Warren Batts
2.3 STREET ADDRESS	402 Dietz Court
2.4 CITY-ST-ZIP	Orlando FL 32807
3.1 TITLE	JUNIOR WARDEN D
3.2 NAME	Scott Alan Roberts
3.3 STREET ADDRESS	4435 Edgewater Dr
3.4 CITY-ST-ZIP	Orlando FL 32804
4.1 TITLE	TREASURER D
4.2 NAME	Curtis Ferrell Johnson
4.3 STREET ADDRESS	5498 Aeolus Way
4.4 CITY-ST-ZIP	Orlando FL 32808-5915
5.1 TITLE	SECRETARY D
5.2 NAME	Wayne Arthur Moore
5.3 STREET ADDRESS	325 Ringwood Cir
5.4 CITY-ST-ZIP	Winter Springs FL 32708-4459
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
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: *Wayne A. Moore* SECRETARY

2-10-97

407 696 4500

CR2E037 (9/96)