

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # C10317

1. Entity Name

NORTH SHORE LODGE NO. 277 FREE AND ACCEPTED MASO

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90046 001 *6,125.00

Principal Place of Business

Mailing Address

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202-3218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1373376

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHEPPARD, ROY CONNOR
220 OCEAN ST
JACKSONVILLE FL 32202

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WMD
AQUINO, ARMANDO L
17911 SW 27TH ST
MIAMI BEACH FL 33026 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
Jacques Vogel
4920 N 36th St
Hollywood FL 33021

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SWD
VOGEL, JACQUES
4920 N 36TH ST
HOLLYWOOD FL 33021 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SENIOR WARDEN (D) ☐ Change ☐ Addition
George Charles Faust
P.O. Box 3868 N/A
Hialeah FL 33013

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JWD
PARENTE, RICARDO
7525 E TREASURE DR #3 E
N BAY VILLAGE FL 33141 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JUNIOR WARDEN (D) ☒ Change ☐ Addition
Raymundo Da Silva
800 N E 195th St #706
N Miami Beach FL 33179

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
AWWE, JEFFREY C
35 NE 3 ST
DIANA FL 33004 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HALAS, GYORGY
10245 COLLINS AVE APT 10C
BAL HARBOR FL 33154 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREASURER (D) ☒ Change ☐ Addition
Ronaldo Boemer Hidalgo
7330 S W 37TH COURT
DAVIE FL 33314

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)