

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2003 8:00 am
Secretary of State

01-16-2003 90083 050 ****61.25

DOCUMENT # C10366

1. Entity Name

**MOST EXCELLENT GRAND CHAPTER OF ROYAL ARCH MASON
S OF FLORIDA**



Principal Place of Business

**400-C JULIA
TITUSVILLE FL 32796-3523
US**

Mailing Address

**400-C JULIA
TITUSVILLE FL 32796-3523
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0246708**

Applied For

Not Applicable

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

**YOUNG, WM. ROBERT
400-C JULIA ST.
TITUSVILLE FL 32796**

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

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKS, WAYNE E 1004 NIN ST ORLANDO FL 32835	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D H. WARREN ALMAND JR 2842 MAGNOLIA BLOSSOM LANE MARIANNA FL 32446-6394	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, DUANE B. 141 SHADOW LANE LAKELAND FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLENN E CHANDLER 5360 REDRAS ST JACKSONVILLE FL 32205	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, WM. ROBERT 400-C JULIA ST. TITUSVILLE FL 32796-3523	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEELE, STEVEN Q 508 LAVILLA DRIVE MIAMI SPRINGS FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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: *Robert T Young* **Robert T Young** 1/5/3 321-383-1530

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)