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Feb 10 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # C10430 (2)
1. Corporation Name
ST. JOHNS CHAPTER NO. 4, ROYAL ARCH MASONS



Principal Place of Business: 2557 N. SPRING GARDEN AVE. DELAND FL 32720 US
Mailing Address: % B.G. COLE 543 N. STONE STREET DELAND FL 32720 US

3. Date Incorporated or Qualified: 06/15/1953
4. FEI Number: 59-3037115
Applied For: Not Applicable

2. Principal Place of Business: 21 Suite, Apt. #, etc.
22 City & State: 23
24 Zip: 25 Country: 26 Mailing Address: 26a 40 Row Fritch Suite, Apt. #, etc. 27 P.O. Box 3127 28 Deland FL 29 32723-3127 30 USA

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
COLE, BERNARD G.
643 NORTH STONE STREET
DELAND FL 32720

10. Name and Address of New Registered Agent
81 Name: Ronald J. Fritch, Secy.
82 Street Address (P.O. Box Number is Not Acceptable): 1420 E. Euclid Ave.
83
84 City: Deland FL 85 Zip Code: 32724

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: Ronald J. Fritch (Ronald J. Fritch) Jan 12, 1998
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	COMBS, JOHN A	24016 E. BOBCAT RD. ASTOR FL	<input type="checkbox"/> DELETE
TITLE	D	VAN NESS, PETE	229 S BLUE LAKE AVENUE DELAND FL	<input type="checkbox"/> DELETE
TITLE	D	SCHUCK, WILLIAM	726 NORTH FLORIDA AVENUE DELAND FL	<input type="checkbox"/> DELETE
TITLE	T	MULLER, JOHN W	708C E MINNESOTA AVE DELAND FL 32724	<input type="checkbox"/> DELETE
TITLE	S	COLE, BERNARD G.	643 N. STONE STREET DELAND FL	<input checked="" type="checkbox"/> DELETE
TITLE				<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Ronald J. Fritch
5.3 STREET ADDRESS	1420 E. Euclid Ave
5.4 CITY-ST-ZIP	Deland, FL
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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: Ronald J. Fritch (Ronald J. Fritch) 1/12/98 904-728-4323

CR2E037 (10/97)