


2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N14955 1. Entity Name MERIDIAN GRAND LODGE OF F & AAY MASONS, INC.	
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FILED

05 APR 14 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 16047 N W 37TH TERRACE REDDICK, FL 32686 US	Mailing Address P O BOX 127 REDDICK, FL 32686 US
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2. Principal Place of Business 10344 NW 177th Place Suite, Apt. #, etc.	3. Mailing Address 10344 NW 177th Place Suite, Apt. #, etc.
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04062005 Chg-NP CR2E037 (10/03)

City & State Reddick, FL	City & State Reddick, FL		
Zip 32686	Country USA	Zip 32686	Country USA

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Name and Address of Current Registered Agent MCKINON, REV JAMES L 16047 NW 37TH TERRACE REDDICK, FL 32686	7. Name and Address of New Registered Agent Name Willie Duncan, Jr. Street Address (P.O. Box Number is Not Acceptable) 10344 NW 177th Place City Reddick
	State FL
	Zip Code 32686

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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 Willie Duncan, Jr. Willie Duncan, Jr. 4/7/05

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

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
Make check payable to Florida Department of State		

10. OFFICERS AND DIRECTORS	
TITLE	D OWENS, LAWRENCE <input checked="" type="checkbox"/> Delete
NAME	OWENS, LAWRENCE
STREET ADDRESS	P O BOX 127
CITY-ST-ZIP	REDDICK, FL 32686
TITLE	S/D <input checked="" type="checkbox"/> Delete
NAME	MCKINON, REV JAMES L
STREET ADDRESS	P O BOX 87
CITY-ST-ZIP	REDDICK, FL 32686
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	MARTIN, WILLIE JAMES
STREET ADDRESS	P.O. BOX 275
CITY-ST-ZIP	REDDICK, FL 32686
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Willie Duncan, Jr.
STREET ADDRESS	10344 NW 177th Place
CITY-ST-ZIP	Reddick, FL 32686
TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Harry L. Copeland
STREET ADDRESS	4012 NW 30th Place
CITY-ST-ZIP	Gainesville, FL 32606
TITLE	S/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Johan Zorilla
STREET ADDRESS	900 Plaza Street, #74
CITY-ST-ZIP	Atlantic Beach, FL 32233
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	100052148541
STREET ADDRESS	04/26/05--01067--001
CITY-ST-ZIP	\$61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Willie Duncan, Jr. Willie Duncan, Jr. 4/7/05 352-591-1949

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #