

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 90528 001 ***918.75

DOCUMENT # N94000003992

1. Entity Name

HIALEAH-OPA-LOCKA LODGE NO. 391, INC. FREE AND A

Principal Place of Business

Mailing Address

220 OCEAN ST.
 JACKSONVILLE FL 32202
 US

220 OCEAN ST.
 JACKSONVILLE FL 32202
 US

73660



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0515896

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 STREET
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.

(NOT : 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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **WMD** Delete
 NAME: **WALDRON, DONALD L**
 STREET ADDRESS: **5414 N.W. 202ND TERRACE**
 CITY-ST-ZIP: **CAROL CITY FL 33055-4723**

TITLE: **WORSHIPFUL MASTER (D)** Change Addition
 NAME: **Richard Louis Benton**
 STREET ADDRESS: **7750 NW 175th St**
 CITY-ST-ZIP: **Hialeah FL 33015**

TITLE: **SWD** Delete
 NAME: **BENTON, RICHARD L**
 STREET ADDRESS: **7750 N.W. 175TH STREET**
 CITY-ST-ZIP: **HIALEAH FL 33015**

TITLE: **SENIOR WARDEN (D)** Change Addition
 NAME: **Robert Lee Petty**
 STREET ADDRESS: **18520 NW 82nd Ave**
 CITY-ST-ZIP: **Hialeah FL 33015**

TITLE: **TD** Delete
 NAME: **POCOCK, JOHN B**
 STREET ADDRESS: **375 FALCON**
 CITY-ST-ZIP: **MIAMI FL 33166-4413**

TITLE: **JUNIOR WARDEN (D)** Change Addition
 NAME: **Esteban Lazo**
 STREET ADDRESS: **1225 W 49th Place, #4**
 CITY-ST-ZIP: **Hialeah FL 33012**

TITLE: **SD** Delete
 NAME: **BENJAMIN FUTCH, HARRY**
 STREET ADDRESS: **PO BOX 820302 N/A**
 CITY-ST-ZIP: **SOUTH FLORIDA FL 33082-0302**

TITLE: Change Addition
 NAME: **MILLER, GARRY W**
 STREET ADDRESS: **430 S.W. 133RD AVENUE**
 CITY-ST-ZIP: **DAVIE FL 33325**

TITLE: **JWD** Delete
 NAME: **MILLER, GARRY W**
 STREET ADDRESS: **430 S.W. 133RD AVENUE**
 CITY-ST-ZIP: **DAVIE FL 33325**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 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]* **Harry Futch, Secretary**

04/18/01 305-885-8225

CR2E037 (10/00)