

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 07, 2004
Secretary of State**

DOCUMENT# N97000004735

Entity Name: MOST WORSHIPFUL CYPRESS GRAND LODGE OF ANCIENT FREE AND ACCEPTED MASONS OF FLORIDA FOUNDATION, INC.

Current Principal Place of Business:

11785 NW 17 AVENUE
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2033
MIAMI, FL 33055

New Mailing Address:

FEI Number: 31-1585707 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BRYANT, HENRY R
3377 NW 179 STREET
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

BRYANT, HENRY L
2817 DOLPHIN DRIVE
MIRAMAR, FL 33025 US

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: HENRY L. BRYANT

10/07/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FITTS, JOHN H
Address: 2801 N.W. 207TH STREET
City-St-Zip: MIAMI, FL 33056

Title: DS () Delete
Name: FITTS, GEORGE E
Address: 3971 N.W. 188 STREET
City-St-Zip: MIAMI, FL 33055

Title: DVP () Delete
Name: BRANFORD, WINSTON G
Address: 19245 N W 53 CIRCLE PLACE
City-St-Zip: MIAMI, FL 33055

Title: DVP () Delete
Name: BRYANT, HENRY L
Address: 3377 N W 179 STREET
City-St-Zip: MIAMI, FL 33055

Title: DT () Delete
Name: BALDWIN, CHARLES
Address: 2843 212 TERRACE
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: BRANFORD, ANTHONY
Address: 19214 NW 48 AVENUE
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: BRYANT, HENRY L
Address: 2817 DOLPHIN DRIVE
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN H. FITTS

DP

10/07/2004

Electronic Signature of Signing Officer or Director

Date