

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # C10365 (0)

1. Corporation Name

GAINESVILLE COUNCIL NO. 27 ROYAL AND SELECT MASTERS

Principal Place of Business

Mailing Address

2121 NORTHEAST 55TH BLVD.
GAINESVILLE FL 32601

P.O. BOX 972
GAINESVILLE FL 32602



3. Date Incorporated or Qualified
06/15/1953

3a. Date of Last Report
02/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-6144503

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARD, HARVEY L.
2121 NORTHEAST 55TH BLVD.
GAINESVILLE FL 32601

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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 DT
NAME JONES, EDWARD C. JR.
STREET ADDRESS 4533 N.E. 77TH AVENUE
CITY-ST-ZIP GAINESVILLE FL ☐ DELETE

TITLE D
NAME CORBIN, CHARLES J.
STREET ADDRESS 2831 NE 15TH STREET
CITY-ST-ZIP GAINESVILLE FL ☐ DELETE

TITLE D
NAME HARRIS, RAYMOND D.
STREET ADDRESS 8125 S.W. 103 AVE
CITY-ST-ZIP GAINESVILLE FL 32608 ☐ DELETE

TITLE S
NAME WARD, HARVEY L.
STREET ADDRESS 2121 N.E. 55TH BLVD.
CITY-ST-ZIP GAINESVILLE FL ☐ DELETE

TITLE D
NAME HEBNER, CHARLES
STREET ADDRESS RR. 1 BOX, 570
CITY-ST-ZIP BRONSON FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DS

D
SANDERSON, William H.
12613 N.W. 112 Ave.
ALACHUA, FL 32616-9567

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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: *Harvey L. Ward* HARVEY L. WARD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-96 (352) 378-3936

Date

Daytime Phone #

CR2E037 (12/95)