2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2005 8:00 am Secretary of State

1. Ently Name OLIN S. WRIGHT LODGE NO. 79 FREE AND ACCEPTED MASONS OF FLORIDA Principal Place of Business CORDY CONNOR SHEPPARD CORDY CONNOR SHEPPARD CORDY CONNOR SHEPPARD CORDY State 2. Principal Place of Business Suite, Apt. 4, etc. City & State Country Country Country Country S. Certification of Status Desired Street Address of Po. Box Number is Not Acceptable) SHEPPARD, ROY CONNOR 220 OCEAN ST JACKSONVILLE, FL 32202 City STEEL Address (PO. Box Number is Not Acceptable) City FL Zip Country Street Address (PO. Box Number is Not Acceptable) City FL Zip Code STEEL ADDRESS AND DIRECTORS In Address (PO. Box Number is Not Acceptable) City FL Zip Code STEEL ADDRESS AND DIRECTORS In 19. By May 1, 2005 10. OFFICERS AND DIRECTORS In ADDRESS AND DIRECTORS In 19. STEEL ADDRESS AND DIRECTORS IN 10. STEEL ADDRESS AND DIRECTORS	DOCUM	MENT # C10115		 -	Secretary of State				
C/O ROY CONNOR SHEPPARD C/O RO	1. Entity Name OLIN S. W	9 VRIGHT LODGE NO. 79 FF	REE AND ACCEPTE	.D		04-	19-2005 90381	014 ****61	.25
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City &	C/O ROY CON 220 OCEAN S	NOR SHEPPARD IT.	C/O ROY CONNOR SHE 220 OCEAN ST.	C/O ROY CONNOR SHEPPARD 220 OCEAN ST.		40061687			
City & State Ci	2. Principal Pl	ace of Business	3. Mailing Address						
Zip Country Zip Country S. Certificate of Status Desired \$8.75 Additional Fee Required S. Certificate of Status Desired S. Certificate of Status Desired Agent	Suite, Apt. #, etc.		Suite, Apt. #, etc.		Oligiti Creation (14 50)				
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. SEPPARD, ROY CONNOR SIFEEI ADDRESS OF CONNOR SIFEEI ADDRESS OF PLANT CITY, FL 335641539 TITLE SOUND SIFEEI ADDRESS OF SIFEI ADDRESS OF SIREEI ADD	City & State		City & State						
SHEPPARD, ROY CONNOR 220 OCEAN ST JACKSONVILLE, FL 32202 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. I am familiar with, and act the obligations of registered agent. Signature, lipsed or prediction and site of statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered office or registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered office or registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agen	Zip	Country	Zip	Cour	ntry	5. Certificate of Sta	itus Desired		
SHEET ADDRESS 120 OCEAN ST 120 OCEAN ST 120 OCEAN ST 120 OCEAN ST 130 Street Address (P.O. Box Number is Not Acceptable) 120 OCEAN ST 130 City 120 City 120 City 120 Code 131 City State of Forda. 1 am familiar with, and acceptable of the obligations of registered agent, or both, in the State of Forda. 1 am familiar with, and acceptable of the obligations of registered agent. 132 City 133 City 143 City 154 City 155 Cit		6. Name and Address of Current	Registered Agent	·		7. Name and Addr	ess of New Registe	red Agent	
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			ļ	Name					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent. 6IGNATURE Sometime, hyped or printed reme of registered agent and table 4 applicable. (MOTE: Registered Agent stynature required whon rematatory) DATE	220 OCEA	N ST			Street Addres	ss (P.O. Box Number is N	ot Acceptable)		
the obligations of registered agent. Signature Signature, byte or printed name of impatitive agent and size of applicable. (NOTE Registered Agent signature required when remissions) DATE				·	City		 	FL Zip Cox	te
Due by May 1, 2005 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE WMD ROUNDS, ROBERT W STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33563 CITY-ST-ZIP PLANT CITY, FL 33564 CITY-ST-ZIP PLANT CITY, FL 33566 TITLE SWD YANCEY, ROYCE A STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE SWD YANCEY, ROYCE A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE SWD YANCEY, ROYCE A STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE SWD YANCEY, ROYCE A STREET ADDRESS STREET	the obligati	ions of registered agent.							
TITLE NAME ROUNDS, ROBERT W STREET ADDRESS 112 W BATES ST CITY-SI-ZIP PLANT CITY, FL 33563 TITLE SD Dekete MAY, ROBERT A STREET ADDRESS Philip Pledger Bethed CITY-SI-ZIP PLANT CITY, FL 335641539 TITLE SWD CITY-SI-ZIP PLANT CITY, FL 335641539 TITLE SWD SWD MAE STREET ADDRESS 811 S WIGGINS RD NAME YANCEY, ROYCE A STREET ADDRESS 811 S WIGGINS RD CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS RO CITY-SI-ZIP PLANT CITY, FL 33566	a * .	•				\$5.00 May Be Added to Fees			
NAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33563 TITLE SD MAY, ROBERT A SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33564 TITLE NAME MAY, ROBERT A SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 335641539 TITLE SWD NAME YANCEY, ROYCE A SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE SWD NAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE NAME SIREET ADDRESS CITY-SI-ZIP NAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE NAME SIREET ADDRESS CITY-SI-ZIP NAME SIREET ADDRESS CITY-SI-ZIP NAME SIREET ADDRESS CITY-SI-ZIP NAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE NAME SIREET ADDRESS CITY-SI-ZIP NAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566	10.	OFFICERS AND DI	IRECTORS	11.					V 10
SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33563 TITLE SD MAY, ROBERT A SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33564 TITLE MAME MAY, ROBERT A SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 335641539 TITLE SWD MAME SWD MAME SWD MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 335641539 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE SWD MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566 TITLE MAME SIREET ADDRESS CITY-SI-ZIP PLANT CITY, FL 33566	1	l	Delete					hange	Addition
ITTLE NAME MAY, ROBERT A STREET ADDRESS PO BOX 1539 N/A CITY-ST-ZIP PLANT CITY, FL 335641539 TITLE SWD NAME YANCEY, ROYCE A STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE SWD NAME YANCEY, ROYCE A STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE JWD NAME BETHEA, PHILIP P STREET ADDRESS STREET ADDRE	1				ET ADDRESS	Bii 5 Wigg	ins Rd	-7242	
STREET ADDRESS PO BOX 1539 N/A CITY-ST-ZIP PLANT CITY, FL 335641539 TITLE SWD NAME YANCEY, ROYCE A STREET ADDRESS CITY-ST-ZIP TITLE SWG JUNIOR WARDEN CITY-ST-ZIP PLANT CITY, FL 33566 TITLE JUND MAME BETHEA, PHILIP P STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE JUND MAME BETHEA, PHILIP P STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANT CITY, FL 33566	1		☐ Delete		9	SEMIOR WARD)EN	(0)	☐ Addition
TITLE SWD ANNE YANCEY, ROYCE A STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE SWD ANNE STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE JWD STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 TITLE PLANT CITY FL 33566	STREET ADDRESS	P O BOX 1539 N/A		1	ET ADORESS F	Philip Plac 1801 Precer	iger Beth 'Vation C	eta .	
NAME STREET ADDRESS CITY-ST-ZIP	TITLE	SWD	Delete	TITLE					☐ Addition
CITY-ST-ZIP PLANT CITY, FL 33566	NAME		,		Ε,				×
MAME BETHEA, PHILIP P STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 Differ ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566	1 1				ST-7IP	Robert Wil	Son Powe	II II	
STREET ADDRESS 1801 PRESERVATION DR STREET ADDRESS CITY-ST-ZIP PLANT CITY, FL 33566 CITY-ST-ZIP		,	Delete					5-9 5 44	Addition
		[STRE	ET ADDRESS (-			:
TITLE TD Delete TITLE Crange □ A	CITY-ST-ZIP								
NAME WILSON, WILLIAM H	TITLE		☐ Delete		I			∐ Change	Addition
STREET ADDRESS 2825 CLUB HOUSE DR STREET ADDRESS		ł '			l l				
CITY-ST-ZIP PLANT CITY, FL 33567 CITY-ST-ZIP	CITY-ST-ZIP	ĺ		CITY	-ST-ZIP				
	TITLE		☐ Delete					☐ Change	■ Addition
NAME STREET ADDRESS STREET ADDRESS	1								
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	1								
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 directly 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 changed, or on an attachment with an address, with all other like empowered.	indicated of the cor	l on this report or supplemental report reporation or the receiver or trustee emp	is true and accurate and that powered to execute this repor	my signat rt as requi	hiro chall have t	iha cama lengi attact ac r	t mane under nath. t	nat I am an oitice	er or director