## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # C10333



**FILED** Mar 27, 2006 8:00 am Secretary of State 03-27-2006 90283 044 \*\*\*\*61.25

229662 2896 Daytime Phone #

GEE LODGE NO. 21 FREE AND ACCEPTED MASONS OF FLORIDA								
C/O ROY CONNOR SHEPPARD 220 OCEAN ST 22		220 OCEAN ST	/O ROY CONNOR SHEPPARD		 	1118 (118 NIGO (NI AND AIDN AIDN	11 <b>2</b> 11 01011 01011	10k St 1001
2. Principal Place of Business 3.		3. Mailing Address	Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02012006 Ch	ig-NP CR2E037	(11/05)	
City & State		City & State			4. FEI Number 23-752633	8		plied For Applicable
Žip	Country	Zip	Country	'	5. Certificate of Sta	Fe	8.75 Addi ee Required	
6. Name and Address of Current Registere		egistered Agent	Agent   Name		7. Name and Address of New Registered Agent			
220 OCEA	D, ROY CONNOR N STREET				s (P.O. Box Number is Not Acceptable)			
JACKSON	VILLE, 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 accept the obligations of registered agent.								
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
Filing Fee is \$61.25  Due by May 1, 2006  9. Election Campaig Trust Fund Contri			, -	ncing	\$5.00 May Be Added to Fees	Make check   Florida Departn		
10.	OFFICERS AND DIRE	CTORS	11.	-	L ADDITIONS/CHANGE	S TO OFFICERS AND DIRE	CTORS IN	10
TITLE	WMD	Delete	TITLE	 WO!	RSHIPFUL	MASTER (D)	Change	Addition
NAME STREET ADDRESS	HENLEY, RAY 11 É BRENT STREET				ian Rober			
CITY-ST-ZIP	CHATTAHOOCHEE, FL 3232418	02	F		0 Box 501	_N/A		
TITLE	SWD	Delete	TITLE		attendocu MIOR WARD	e <b>e</b> FL 32324-	<b>X</b> —	Addition
NAME	WRIGHT, BRIAN ROBERT		NAME STREET ADDRESS ;			cel Baggett	A —	
STREET ADDRESS CITY-ST-ZIP	P.O. BOX 501 CHATTAHOOCHEE, FL 3232405	<b>01</b>				Landing Rd		ĺ
TITLE /	TD	Delete	TITLE			saara maaaa —	☐ Change	Addition
NAME	WILLIFORD, JACK A		NAME	.11 1	NIOR WARD			X
STREET ADDRESS CITY-ST-ZIP	7496 HIGHWAY 90 WEST		STREET AC	DORESS 177.		en Johnson		
TITLE	SNEADS, FL 324607110 SD	Delete		<u></u> i2	8 Hill Cr	est Dr —	Chance	☐ Addition
NAME	JOHNSON, ROBERT L	Delete	TITLE NAME	. <b>B</b> a	inbridge	<b>GA</b>	☐ Change	L.J. Addition
STREET ADDRESS	P.O. BOX 272		STREET AC		ECRETARY	(D)	X	
CITY-ST-ZIP	CHATTAHOOCHEE, FL 32324		CITY-ST-			Johnson Jr		
TITLE NAME	JD BAGGETT, RONNIE MICHAEL	Delete	TITLE NAME	1:	38 McLero	y mo GA 31918-68	nge ;;=;;	Addition
STREET ADDRESS	2999 COOKS LANDING RD		STREET AC		Tittol (alle			1
CITY-ST-ZIP	QUINCY, FL 323510425		CITY-ST-	ZIP	· · — ·			
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition
name Street address			NAME STREET AL	ODBESS				}
CITY-ST-ZIP			CITY-ST-					ļ
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 written address, with all other like empowered.  Robert L. Johnson								