2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State
03-23-2007 90015 035 ****61.25

DOCUMENT # C10115

1. Entity Name
OLIN S. WRIGHT LODGE NO. 79 FREE AND ACCEPTED MASONS OF FLORIDA

40040240

Principal Place of Business	Mailing Address
C/O ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSSONVILLE, FL 32202	C/O ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSSONVILLE, FL 32202

01182007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7526377 ☐ Applied For ☐ Not Applicable

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 ST 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. 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, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BETHEA, PHILIP P 1801 PRESERVATION DR PLANT CITY, FL 335660943	☒ Delete	JUNIOR WARDEN (D) Clarence Frank Rudolph IV P O Box 292595 Tampa FL 33687-2595	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILSON POWELL, ROBERT II 2916 BARRETT AVE PLANT CITY, FL 335669566	☒ Delete	WORSHIPFUL MASTER (D) Robert Wilson Powell II 2916 Barrett Ave Plant City FL 33566-9576	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MITTONS, LOUIS K II 516 VALENCIA PARK DR SEFFNER, FL 335845494	☒ Delete	SENIOR WARDEN (D) Louis Kelly Mittong II 516 Valencia Park Dr Seffner FL 33584-5494	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PIATT, BEJAMNIN P 3411 KING GEORGE LANE SEFFNER, FL 335846115	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WILSON, WILLIAM H 2825 CLUB HOUSE DR PLANT CITY, FL 33567	☒ Delete	SECRETARY (TD) Robert Alexander May P O Box 1539 N/A Plant City FL 33564-1539	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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 with an address, with all other like empowered.

SIGNATURE: Robert A. May Robert A. May 3/16/07 904-354-2339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #