2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 06, 2008

DOCUMENT# N06809 Secretary of State Entity Name: MOST WORSHIPFUL CYPRESS GRAND LODGE OF ANCIENT FREE AND ACCEPTED MASONS OF FLORIDA, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 11785 NW 17TH AVENUE MIAMI, FL 33167 **Current Mailing Address: New Mailing Address:** P.O. BOX 2033 CAROL CITY, FL 33055 US FEI Number: 59-2538394 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WINSTON, BRANFORD G 19245 NW 53 CIRCLE PLACE MIAMI, FL 33055 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BRANFORD, WINSTON G MR. Name: Name: Address: 19245 NW 53 CIRCLE PLACE Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: Title: VD () Delete Title: () Change () Addition TRENT, WILLIAM MR Name: Name: Address: 19500 NW 37 PLACE Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: Title: () Delete Title: () Change () Addition PARKER, FLOYD C Name: Name: 11851 NW 187TH STREET Address: Address: City-St-Zip: MIAMI, FL 33056 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BALDWIN, CHARLES Name: 2843 NORTHWEST 212 TERRACE Address: Address: City-St-Zip: CAROL CITY, FL 33056 City-St-Zip: Title: () Delete Title: () Change () Addition FITTS, JOHN H MR Name: Name: 2954 DEEP COVE DRIVE, NW Address: Address: City-St-Zip: CONCORD, NC 28027 City-St-Zip: Title: () Delete Title: () Change () Addition KING, JAMES A Name: Name: Address: 1140 NW 128TH TERRACE Address: MIAMI, FL 33186 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WINSTON BRANFORD PD 07/06/2008