2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N06809

Entity Name: MOST WORSHIPFUL CYPRESS GRAND LODGE OF ANCIENT FREE AND ACCEPTED MASONS OF FLORIDA, INCORPORATED

Current Principal Place of Business:

11785 NW 17TH AVENUE
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2033
CAROL CITY, FL 33055 US

New Mailing Address:

FEI Number: 59-2538394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WINSTON, BRANFORD G
19245 NW 53 CIRCLE PLACE
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

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:

Title:	PD	( ) Delete
Name:	BRANFORD, WINSTON G MR.	
Address:	19245 NW 53 CIRCLE PLACE	
City-St-Zip:	MIAMI, FL 33055	
Title:	VD	( ) Delete
Name:	TRENT, WILLIAM MR	
Address:	19500 NW 37 PLACE	
City-St-Zip:	MIAMI, FL 33055	
Title:	T	( ) Delete
Name:	PARKER, FLOYD C	
Address:	11851 NW 187TH STREET	
City-St-Zip:	MIAMI, FL 33056	
Title:	D	( ) Delete
Name:	BALDWIN, CHARLES	
Address:	2843 NORTHWEST 212 TERRACE	
City-St-Zip:	CAROL CITY, FL 33056	
Title:	D	( ) Delete
Name:	FITTS, JOHN H MR	
Address:	2954 DEEP COVE DRIVE, NW	
City-St-Zip:	CONCORD, NC 28027	
Title:	S	( ) Delete
Name:	KING, JAMES A	
Address:	1140 NW 128TH TERRACE	
City-St-Zip:	MIAMI, FL 33186	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	KING, JAMES A	
Address:	PO BOX97-2238	
City-St-Zip:	MIAMI, FL 33197 22	

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 04/27/2009

Electronic Signature of Signing Officer or Director — Date