2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004735

Entity Name: MOST WORSHIPFUL CYPRESS GRAND LODGE OF ANCIENT

FREE AND ACCEPTED MASONS OF FLORIDA FOUNDATION, INC.

FILED Feb 08, 2014 Secretary of State CC4725008877

Current Principal Place of Business:

11785 NW 17 AVENUE MIAMI, FL 33167

Current Mailing Address:

P.O. BOX 2033 MIAMI, FL 33055

FEI Number: 31-1585707 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, ALTARR 8362 PINES BLVD. SUITE 424 PEMBROKE, FL 33024 US

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: ALTARR WILLIAMS 02/08/2014

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **PRESIDENT** Title VΡ Name WILLIAMS, ALTARR Name TRENT, WILLIAM Address P.O. BOX 2033 Address P.O. BOX 2033 City-State-Zip: MIAMI FL 33055 City-State-Zip: MIAMI FL 33055 VΡ Title **SECRETARY** Title MOISE, STENIO Name SMITH, GLEN Name Address P.O. BOX 2033 Address P.O. BOX 2033 City-State-Zip: MIAMI FL 33055 City-State-Zip: MIAMI FL 33055 Title **DIRECTOR** Title TREASURER

Name NOWELL, WAYNE Name SPANN, EDDIE JR.

Address P.O. BOX 2033 Address P.O. BOX 2033

City-State-Zip: MIAMI FL 33055

City-State-Zip: MIAMI FL 33055

Title DIRECTOR
Name DUREN, OBIE
Address P.O. BOX 2033
City-State-Zip: MIAMI FL 33055

I hereby 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 all other like empowered.

SIGNATURE: ALTARR WILLIAMS

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 02/08/2014

Date