


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

<b>DOCUMENT # 712659</b>		
1. Entity Name <b>UNITED FREE AND ACCEPTED MASONS OF THE WORLD, INC.</b>		
Principal Place of Business 1210 UNION STREET SOUTH ST PETERSBURG FL 33712		Mailing Address 1210 UNION STREET SOUTH ST PETERSBURG FL 33712
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
<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>
<b>TUNSIL, MCCORTHA</b> <b>2540 11TH AVE S</b> <b>ST PETERSBURG FL 33712</b>		Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
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 _____		DATE _____
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when re-registering)

**FILED**  
**Aug 27, 2008 08:00 AM**  
**Secretary of State**



2nd MOORE      CR2E037 (4/08)

4. FEI Number <b>23-7164454</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By September 3, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST</b> <b>BROWN, JAMES W</b> <input type="checkbox"/> Delete <b>3310 16TH AVE SOUTH</b> <b>ST PETERSBURG FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>U00000958432</b> <b>08/27/08-80002-006 61.25</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MCCORTHA, TUNSIL</b> <input type="checkbox"/> Delete <b>2540 11TH AVE SO</b> <b>ST PETERSBURG FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TOOKES, HARVEY J</b> <input type="checkbox"/> Delete <b>2500 27TH ST SO</b> <b>ST PETERSBURG FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BENNETT, HARRY L</b> <input type="checkbox"/> Delete <b>PO BOX 2895</b> <b>SARASOTA FL 34236</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HOWARD, JACK</b> <input type="checkbox"/> Delete <b>P.O. BOX #383</b> <b>INDIANTOWN FL 34956</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BAYNARD, LEE</b> <input type="checkbox"/> Delete <b>P.O. BOX #321</b> <b>PINETTA FL 32350</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:** *James W. Brown*

*8-25-2008*