2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712659

FILED Jul 06, 2009 Secretary of State

Entity Name: UNITED FREE AND ACCEPTED MASONS OF THE WORLD, INC.

Current Pr	incipal Place of Business:	New Principal Place of Business:
	N STREET SOUTH SBURG, FL 33712	
Current Ma	ailing Address:	New Mailing Address:
	N STREET SOUTH SBURG, FL 33712	
	23-7164454 FEI Number Applied For the with s. 607.193(2)(b), F.S., the corporation Address of Current Registered Age	n did not receive the prior notice.
TUNSIL,MO 2540 11TH ST PETER		
The above in the State		or the purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:	
	Electronic Signature of Register	ed Agent Date
OFFICERS	AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	ST () Delete BROWN, JAMES W 3310 16TH AVE SOUTH ST PETERSBURG, FL	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete MCCORTHA, TUNSIL 2540 11TH AVE SO ST PETERSBURG, FL	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete TOOKES, HARVEY J 2500 27TH ST SO ST PETERSBURG, FL	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete BENNETT, HARRY L PO BOX 2895 SARASOTA, FL 34236	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete HOWARD, JACK P.O. BOX #383 INDIANTOWN, FL 34956	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete BAYNARD, LEE P.O. BOX #321 PINETTA, FL 32350	Title: () Change () Addition Name: Address: 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: JAMES W BROWN ST 07/06/2009