

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 07, 2003 8:00 am**  
**Secretary of State**

02-07-2003 90040 005 \*\*\*\*61.25

**DOCUMENT # 716458**



1. Entity Name  
**THE GRAND LODGE KNIGHTS OF PYTHIAS, OF NORTH AMERICA, SOUTH AMERICA, EUROPE, ASIA, AFRICA, AND A**

Principal Place of Business  
**1040 BROAD ST.  
P.O. BOX 2021  
JACKSONVILLE FL 32203**

Mailing Address  
**1040 BROAD ST.  
P.O. BOX 2021  
JACKSONVILLE FL 32203**

**22004546**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-0596850</b>		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
<b>JOHNSON, JOHNNY 1002 AVENUE E FT. PIERCE FL 34950</b>				Name <b>Monette, Clarence</b>			
				Street Address (P.O. Box Number is Not Acceptable)			
				<b>313 Avenue B</b>			
				City <b>Port St. Joe,</b>		<b>FL</b>	Zip Code <b>32456</b>

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 **Clarence Monette, Grand Chancellor** *Clarence Monette* 1/17/03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25</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 SD <b>WADE, GLEN</b>	<input type="checkbox"/> Delete	TITLE NAME <b>Monette, Clarence</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1408 MAUDE STREET</b>		STREET ADDRESS <b>313 Avenue B</b>	
CITY-ST-ZIP <b>TALLAHASSEE FL</b>		CITY-ST-ZIP <b>Port St. Joe, FL 32456</b>	
TITLE NAME D <b>JOHNSON, JOHNNY</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME <b>Monette, Clarence</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>1002 AVENUE E</b>		STREET ADDRESS <b>313 Avenue B</b>	
CITY-ST-ZIP <b>FT. PIERCE FL 34950</b>		CITY-ST-ZIP <b>Port St. Joe, FL 32456</b>	
TITLE NAME TD <b>MCQUEEN, WILLIAM</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME <b>TD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>2920 RACKLEY DRIVE</b>		STREET ADDRESS <b>Gunn, Henry</b>	
CITY-ST-ZIP <b>TALLAHASSEE FL 32310</b>		CITY-ST-ZIP <b>4639 Hosford Hwy.</b>	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 provided 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 emendations.

SIGNATURE: **Clarence Monette, Grand Chancellor** *Clarence Monette* 1/17/03 (904) 354-3003

CR2E037 (10/02)