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

FILED
Jan 23, 2003 8:00 am
Secretary of State
01-23-2003 90175 005 ****61.25

DOCUMENT # 727808

1. Entity Name
KING FREDDIE LODGE #86, INC.

Principal Place of Business	Mailing Address
2767 N.W. 4TH COURT POMPANO BEACH FL 33060	2767 N.W. 4TH COURT POMPANO BEACH FL 33060

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0103550 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WILSON, WOODROW 2120 N.W. 28TH STRET FT. LAUDERDALE FL 33312	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	WILSON, WOODROW	NAME	
STREET ADDRESS	2120 N.W. 28TH STREET	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LYONS, ROBERT	NAME	
STREET ADDRESS	1231 N.W. 17TH STREET	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FAVORS, ELLNOR	NAME	
STREET ADDRESS	199 N.W. 8TH AVENUE	STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33060	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KALE, JESSIE	NAME	
STREET ADDRESS	861 N.W. 33RD AVENUE	STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33311	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	BANKS, ROSA	NAME	
STREET ADDRESS	2767 N.W. 4TH COURT	STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33069	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	DAVENPORT, FRANCIS	NAME	
STREET ADDRESS	748 N. DEARFIELD AVENUE	STREET ADDRESS	
CITY-ST-ZIP	DEARFIELD BEACH FL 33441	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 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: SIGNATURE REQUIRED Woodrow Wilson 1/21/03

CR2E037 (10/02)