

NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90015 019 ****61.25

DOCUMENT # 758842

1. Entity Name

KEYSTONE HEIGHTS SHRINE CLUB
ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

40042682

2. Principal Place of Business - No P.O. Box #

5593 SE 3rd Ave

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 152

Suite, Apt. #, etc.

CR2E037B (5/07)

City & State

Keystone Heights, FL

City & State

Keystone Heights, FL

4. FEI Number

59-2863380

Applied For

Not Applicable

Zip

32090

Country

Beadford

Zip

32656

Country

Clay

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Ellington J. McMeekin, Jr.

Street Address (P.O. Box Number is Not Acceptable)

21907 SE 171st Ave., P.O. Box 128

City
Hawthorne,

FL

Zip Code
32640

**DO NOT WRITE
IN THIS SPACE**

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

FEE IS \$61.25
Initial or Amended AR

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
William (Billy) Wolfe
7184 King St.
Keystone Heights, FL 32656

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1 ST V
Wally Riviere
6887 CR. 214
Melrose, FL 32666

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2 ND V
Steve Taylor
8123 Meadowlark CT.
Melrose, FL 32666

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Sec'y
Edward Brickle
15240 US 301 South
Hawthorne, FL 32640

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Trea.
Ellington J McMeekin, Jr.
P.O. Box 128
Hawthorne, FL 32640

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P.P.
Kenneth Gunter
5737 North Crater Lake
Keystone Heights, FL 32656

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *E. J. McMeekin, Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 10, 2008 352-481-2591

Date

Daytime Phone #