## 2001 UNIFORM BUSINESS REPORT (UBR)

## May 30, 2001 8:00 am § Secretary of State DOCUMENT # 763306 05-30-2001 90026 008 \*\*\*\*61.25 CRESTVIEW, FLORIDA LODGE #2624, BENEVOLENT AND P Principal Place of Business Mailing Address 771993 127 PINE AVE W 127 PINE AVE W PO BOX 153 PO BOX 153 CRESTVIEW FL 32536 CRESTVIEW FL 32536 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2070926 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) THOMAS, CHARLES G 105 THURSTON PLACE CRESTVIEW FL 32536 City 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. SIGNATURE (NOT: Registered Agent signature required when reinstating) DATE Stanature, typed or printed name of registered agent and title if applicable FILE NOW: 9. Election Campaig: Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition ☐ Delete TITLE TITLE JOHNSON, GARY NAME NAME STREET ADDRESS 3180 PALMETTA AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 32539 ☐ Delete TITLE ☐ Change ■ Addition TITLE JENKINS, JERRY NAME NAME STREET ADDRESS 6169 GARDEN CITY RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL - Delete -TITLE ☐ Change — ☐ Addition-TITLE THAMES, RANDY NAME NAME STREET ADDRESS STREET ADDRESS 3153 AIRPORT ROAD CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL ☐ Addition TITLE ☐ Delete TITLE NAME CLARK, WILBURN N NAME STREET ADDRESS STREET ADDRESS 5984 CLARK MOORE LN CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 32531 TR ☐ Delete TITLE ☐ Addition TITLE TYNER, PAUL NAME NAME STREET ADDRESS P.O. BOX 1982 N/A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 32536

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 in 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.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE REQUIR

☐ Delete

W.N. Clark 5-27-01

FILED

Addition