

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770979

FILED
Mar 28, 2006
Secretary of State

Entity Name: MOROCCO TEMPLE ASSOCIATION, INC.

Current Principal Place of Business:

3800 ST. JOHNS BLUFF RD., S.
P.O. BOX 16039
JACKSONVILLE, FL 322242620 US

New Principal Place of Business:

Current Mailing Address:

3800 ST. JOHNS BLUFF RD., S.
P.O. BOX 16039
JACKSONVILLE, FL 322456039 US

New Mailing Address:

FEI Number: 59-6153121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOSS, ARTHUR
3800 ST JOHNS BLUFF RD S
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: ACKLEY, PAUL N
Address: 4212 BEGONIA DR.
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: BACCASH, GEORGE
Address: 1476 AVONDALE AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: S () Delete
Name: DOSS, ARTHUR L
Address: 6289 NANCY DR
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: ROUSE, JAMES W JR
Address: 11355 WOODSONG LOOP S
City-St-Zip: JACKSONVILLE, FL 32225

Title: PD () Delete
Name: RAINES, JAMES H
Address: 3229 CALLIE COURT
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ACKLEY, PAUL N
Address: 4212 BEGONIA DR.
City-St-Zip: MIDDLEBURG, FL 32068

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: ROUSE, JAMES W JR
Address: 11355 WOODSONG LOOP S
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: LUMPKIN, THOMAS L
Address: 4642 CONFEDERATE OAKS DRIVE
City-St-Zip: JACKSONVILLE, FL 322106121

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTHUR L. DOSS

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03/28/2006

Electronic Signature of Signing Officer or Director

Date