


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2005 8:00 am
Secretary of State

06-17-2005 90001 004 ****61.25

DOCUMENT # 845576					
1. Entity Name THE IMPERIAL COUNCIL OF THE ANCIENT ARABIC ORDER OF THE NOBLES OF THE MYSTIC SHRINE FOR NORTH AM					
Principal Place of Business 2900 ROCKY POINT DRIVE TAMPA, FL 33607			Mailing Address 2900 ROCKY POINT DRIVE TAMPA, FL 33607		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 36-2158164	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	T BRACEWELL, GENE 1015 THIMBELGATE COURT ALPHARETTA, GA 30022	<input type="checkbox"/> Delete			
P OIN, M. BURTON 7832 E EBOLA AVE MESA, AZ 85208	<input checked="" type="checkbox"/> Delete				
S JONES, JACK H 2900 ROCKY POINT DRIVE TAMPA, FL	<input type="checkbox"/> Delete				
D LEMIEUX, M.D., BERNARD J 649 W FRONT ST PERRYSBURG, OH 43551	<input type="checkbox"/> Delete				
D THOMAS, NICHOLAS 8559 MANGO AVE FONTANA, CA 92335	<input checked="" type="checkbox"/> Delete				
VP FREVEL, SR., RAOUL L 4507 HARFORD RD BALTIMORE, MD 21214	<input checked="" type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
P Frevel, Sr., Raoul L. 4507 Harford Road Baltimore, Maryland 21214	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
D Maxwell, Douglas E. 15148 Islevue Drive Chesterfield, Missouri 63017	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
VP Dunwoody, Gary W. 3803 N.Hills Boulevard North Little Rock, Arkansas 72116	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
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: _____ Raoul L. Frevel, Sr., President 06/14/05(813)281-8110					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					