

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90253 047 ****61.25

DOCUMENT # C10019

1. Entity Name
**ACME LODGE NO. 222 FREE AND ACCEPTED MASONS
OF FLORIDA**



Principal Place of Business
**C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US**

Mailing Address
**C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02072006 Chg-NP CR2E037 (11/05)

4. FEI Number
23-7161311

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

**SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE, FL 32202**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **PHARES, ROBERT G WM**
STREET ADDRESS **PO BOX 6733**
CITY-ST-ZIP **PANAMA CITY, FL 324046733**

WORSHIPFUL MASTER (D) ☐ Change ☒ Addition
Russell Wilkinson
3000 W 21st Ct
Panama City FL 32405-1802

TITLE **D** ☒ Delete
NAME **CUTCHENS, JACK O SW**
STREET ADDRESS **1115 KENTUCKY AVE**
CITY-ST-ZIP **LYNN HAVEN, FL 324442246**

SENIOR WARDEN (D) ☐ Change ☒ Addition
Johnathan David Woodward
P O Box 351 N/A
Panama City FL 32402-0351

TITLE **S** ☒ Delete
NAME **LIVINGSTON, KENNETH L JW**
STREET ADDRESS **7302 WILLOW WOOD RD**
CITY-ST-ZIP **PANAMA CITY, FL 324091520**

JUNIOR WARDEN (D) ☐ Change ☒ Addition
Harry Warren Quickel Jr
6227 Heather Marie Ln
Panama City FL 32404-8304

TITLE **T** ☐ Delete
NAME ☒ **HEATON, DONALD L**
STREET ADDRESS **208 HARRIS AVE**
CITY-ST-ZIP **PANAMA CITY, FL 32401**

TITLE ☐ **NAME**
STREET ADDRESS ☐ **CITY-ST-ZIP**

TITLE **S** ☐ Delete
NAME ☒ **PEUGH, DARRELL F**
STREET ADDRESS **253 HIGH THOMAS DR**
CITY-ST-ZIP **PANAMA CITY, FL 324048551**

TITLE ☐ **NAME**
STREET ADDRESS ☐ **CITY-ST-ZIP**

TITLE ☐ **NAME**
STREET ADDRESS ☐ **CITY-ST-ZIP**

TITLE ☐ **NAME**
STREET ADDRESS ☐ **CITY-ST-ZIP**

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Darrell Peugh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-14-2006 850-871-1744