

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # C10026

1. Entity Name

CENTURY LODGE NO. 213 FREE AND ACCEPTED MASONS O

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90046 001 *6,125.00

Principal Place of Business

Mailing Address

ROY CONNER SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202

ROY CONNER SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202-3218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7526463

Applied For

Not Applicable

Zip

Country

Zip

Country

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE WMD
NAME DAY, JIM B
STREET ADDRESS 8721 OLD FLAMATON ROAD
CITY-ST-ZIP CENTURY FL 32535

☒ Delete

TITLE SD
NAME GRANT, GLENN GARY
STREET ADDRESS 30 ELISIE DAVIS RD.
CITY-ST-ZIP CENTURY FL 32535

☐ Delete

TITLE SWD
NAME BARNES, JAMES E
STREET ADDRESS P.O. BOX 648
CITY-ST-ZIP CENTURY FL 32535

☒ Delete

TITLE TD
NAME WILLIAMS, RICHARD BILLY
STREET ADDRESS 15528 HWY 87 N
CITY-ST-ZIP JAY FL 32565

☐ Delete

TITLE JWD
NAME REARDON, CHARLES N
STREET ADDRESS P.O. BOX 668
CITY-ST-ZIP FLOMOTON AL 36441

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE WORSHIPFUL MASTER (D)
NAME James Edward Barnes
STREET ADDRESS P.O. Box 648 N/A
CITY-ST-ZIP Century FL 32535

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SENIOR WARDEN (D)
NAME Charles Nathaniel Reardon
STREET ADDRESS P.O. Box 1 N/A
CITY-ST-ZIP Flomoton AL 36441

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE JUNIOR WARDEN (D)
NAME James Nelson Underwood
STREET ADDRESS 15540 HWY 87 N
CITY-ST-ZIP JAY FL 32565

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)