## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # C10026

CENTURY LODGE NO. 213 FREE AND ACCEPTED MASONS O



FILED
Mar 24, 2003 8:00 am
Secretary of State
03-24-2003 91004 001 \*1,715.00

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Principal Place ROY CONNER 220 OCEAN S JACKSONVILL	τ	Mailing Address ROY CONNER SHEPPAF 220 OCEAN ST JACKSONVILLE FL 3220			40    0       8	<b>6  6   6:6   6  6</b>	<b>                                    </b>
2. Principal Place of Business		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State	City & State		4. FEI Number 23-7526463		applied For
Zip	Country	Zip	Country	5. Certificate of Sta	tus Desired	\$8.75 Ac	ditional
	6. Name and Address of C	urrent Registered Agent		7. Name and Addr	ess of New Register		-
			Name				
SHEPPA	RD, ROY CONNOR		Stroot Addr	race (P.O. Boy Number is N	at Accontable)		
	AN STREET		Sireet Addr	ress (P.O. Box Number is N	or Acceptable)		
JACKSO	NVILLE FL 32202						
			City			Zip Co	
						FL Zip Co	
		nent for the purpose of changing	its registered office or req	gistered agent, or both, in th	ne State of Florida. I	am familiar with	, and accept
the obligat	ions of registered agent.			•			
SIGNATURE .	Signature, typed or printed name of registers	and agent and title if applicable (A)	OTE: Registered Agent signature re	acuired when reinstation)	DA	TE	
	Signature, typed or printed riame of registers	во аделиана наврисавие. (14	OTE. hegistered Agent signature re	ednisa wien ieinstatrid)	UA	4 <b>C</b> .	
	FILE NOW: FEE IS \$61.25	1 I	ampaign Financing d Contribution.	\$5.00 May Be Added to Fees		eck Payable partment of	
10.	OFFICERS A	1 I	· · · · -		Florida Dep	partment of	State
	OFFICERS AI	Trust Fund	I Contribution.	Added to Fees  ADDITIONS/CHANGE	Florida Dep	DIRECTORS II	State N 10
10. TITLE NAME	OFFICERS AI TD DAY, JIM B	Trust Fund	11. TITLE	Added to Fees	Florida Dep	DIRECTORS II	State N 10
10. TITLE NAME	OFFICERS AI TD DAY, JIM B 8721 OLD FLOMATON RD	Trust Fund	11. TITLE NAME	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis	Florida Dep	DIRECTORS II	State N 10
10. TITLE NAME STREET ADDRESS	OFFICERS AI  TD  DAY, JIM B  8721 OLD FLOMATON RD  CENTURY FL 32535	Trust Fund	11. TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982	Florida Deps TO OFFICERS AND ASTER (D	DIRECTORS II	State N 10
10.	OFFICERS AI TD DAY, JIM B 8721 OLD FLOMATON RD CENTURY FL 32535 SD	Trust Fund	TITLE NAME STREET ADDRESS, CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982 Century FL 3	Florida Department of the Florida Department	DIRECTORS II	State N 10 Addition
10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AI  TD  DAY, JIM B  8721 OLD FLOMATON RD  CENTURY FL 32535	Trust Fund  ND DIRECTORS  Delete	TITLE NAME STREET ADDRESS, CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982	Florida Department of the Florida Department	DIRECTORS II	State N 10 Addition
TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	OFFICERS AI TD DAY, JIM B 8721 OLD FLOMATON RD CENTURY FL 32535 SD	Trust Fund  ND DIRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982 Century FL 3	Florida Dep STO OFFICERS AND ASTER (D N/A 2535 - 1	DIRECTORS II	State
TITLE VAME STREET ADDRESS CITY-ST-ZIP VITLE VAME STREET ADDRESS STREET ADDRESS	OFFICERS AI TD DAY, JIM B 8721 OLD FLOMATON RD CENTURY FL 32535 SD GRANT, GLENN GARY	Trust Fund  ND DIRECTORS  Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982 Century FL 3 SENIOR WARDE Carl Peters	Florida Dep STO OFFICERS AND ASTER (D N/A 2535	DIRECTORS II	State N 10 Addition
110.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AI TD DAY, JIM B 8721 OLD FLOMATON RD CENTURY FL 32535 SD GRANT, GLENN GARY 30 ELISIE DAVIS RD.	Trust Func	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982 Dentury FL 3 SENIOR WARDE Carl Peters 3120 Highway	Florida Department of the second seco	DIRECTORS II	State N 10 Addition Addition
10. Title Name Street address City-St-Zip	OFFICERS AI TD DAY, JIM B 8721 OLD FLOMATON RD CENTURY FL 32535 SD GRANT, GLENN GARY 30 ELISIE DAVIS RD. CENTURY FL 32535	Trust Fund  ND DIRECTORS  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL M Tom N Mathis P O Box 982 Century FL 3 SENIOR WARDE Carl Peters 3120 Highway Century Fl 3	Florida Dep STO OFFICERS AND ASTER (D N/A 2535	DIRECTORS II Change	State N 10 Addition Addition
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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. Grant

SIGNATURE: