

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # C10027 (6)

1. Corporation Name

LAKE WALES LODGE NO. 242 FREE AND ACCEPTED MASON S OF FLORIDA



Principal Place of Business: ROY CONNOR SHEPPARD, 220 OCEAN ST, JACKSONVILLE FL 32202, US
Mailing Address: ROY CONNOR SHEPPARD, 220 OCEAN ST, JACKSONVILLE FL 32202-3218, US

3. Date Incorporated or Qualified: 07/01/1992
3a. Date of Last Report: 03/08/1996

2. Principal Place of Business (21-24) and Mailing Address (25-28) details including Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number: 59-2900926
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: SHEPPARD, ROY CONNOR, 220 OCEAN STREET, JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent (81-85) details including Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [Signature] DATE: 2-3-97

Table with 12 rows listing Officers and Directors (12. OFFICERS AND DIRECTORS) with columns for Title, Name, Street Address, and City-ST-ZIP.

Table with 6 rows listing Additions/Changes to Officers and Directors (13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12) with columns for Title, Name, Street Address, and City-ST-ZIP.

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gregory Fisher, Secretary, 2/10/97, 904-354-2339

CF2E037 (9/96)