2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # C10031

1. Entity Name

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SAINT ANDREWS LODGE NO. 212 FREE ANDD ACCEPTED MASONS OF FLORIDA



FILED

Mar 27, 2006 8:00 am Secretary of State

03-27-2006 90253 020 ****61.25

Principal Place of Business C/O ROY CONNOR SHEPPARD Mailing Address

C/O ROY CONNOR SHEPPARD

JACKSONVILI	51. LE, FL 32202	JACKSONVILLE, FL 32	2202	 		TIL BEBIG BEBIG BEBIG BEBIG BEBI		
2. Principal Place of Business 3. Ma		3. Mailing Address	Mailing Address					
Suite, Apt. #, etc. S		Suite, Apt. #, etc.	Suite, Apt. #, etc.		hg-NP (CR2E037 (11/05)		
City & State		City & State	ity & State		4. FEI Number Applied For 59-1379644 Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current Re	gistered Agent		7. Name and Add	ress of New Regi	istered Agent		
			Name	Name				
SHEPPARD, ROY CONNOR 220 OCEAN STREET JACKSONVILLE, FL 32202			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
•			City	FL Zip Code				
SIGNATURE Signature, typed or printed name of registered agent and title if ap Filling Fee is \$61.25 Due by May 1, 2006		9. Election Ca	pplicable. (NOTE: Registered Agent signature requestions) 9. Election Campaign Financing Trust Fund Contribution.) May Be Make check payable to to Fees Florida Department of State			
10.	OFFICERS AND DIRE	CTORE	111.		En To OFFICERS	AND DIDEATORS IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REDD, MITCHELL H 3700 W 22ND PLAZA PANAMA CITY, FL 324051311	Delete	WORSHIP Paul Eu 221 N M	ADDITIONS/CHANG FUL MASTER SERE Kirkp GCAPTHUP A	(D) atrick	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TYREE, GREGORY G 8307 CLUSTER RD PANAMA CITY, FL 324045063	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	City FL 32	401-38 <u>6</u> 1	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HIGHTOWER, ROY A 2613 W 27TH ST PANAMA CITY, FL 324052108	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME	TD BASS, VIRGIL D	☐ Delete	TITLE NAME			☐ Change	Addition	

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.

TITLE

NAME

SIGNATURE:

STREET ADDRESS 3541 FLORIDA AVE

PANAMA CITY, FL 324053324

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roy A. Hightower

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

JUNIOR WARDEN-

Richard Travis Clark

5403 Merritt Brown Rd

Panama City FL 32404-3032

CITY_ ST_7ID

☐ Delete

☐ Delete

3-9-06

(850) 785-0051 Daytime Phone #

Change

☐ Change ★ Addition

☐ Addition

(D)