

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

**FILED**  
**Mar 24, 2003 8:00 am**  
**Secretary of State**

03-24-2003 91003 001 \*1,470.00

**DOCUMENT # C10038**



1. Entity Name  
**SEBRING LODGE NO. 249 FREE AND ACCEPTED MASONS O  
F FLORIDA**

Principal Place of Business Mailing Address  
**ROY CONNOR SHEPPARD** **ROY CONNOR SHEPPARD**  
**220 OCEAN ST.** **220 OCEAN ST.**  
**JACKSONVILLE FL 32202** **JACKSONVILLE FL 32202**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-1651185** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional  
Fee Required**



CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

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

**7. Name and Address of New Registered Agent**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW: FEE IS \$61.25**

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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SWD</b> <b>WEEKS, EVERETT C</b> <b>216 LONGVIEW ROAD</b> <b>SEBRING FL 33870</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>WMD</b> <b>WILLIAMS, KENNETH</b> <b>1350 NE LAKEVIEW DR</b> <b>SEBRING FL 33870</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD</b> <b>YOUNG, OWEN M</b> <b>PO BOX 208</b> <b>SEBRING FL 33871-0208</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD</b> <b>VAN EVERY, DESHA O</b> <b>276 WHIP-POOR-WILL DR</b> <b>SEBRING FL 33872</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>JWD</b> <b>WEBSTER, WILLIAM I</b> <b>418 SKYLARK DR</b> <b>SEBRING FL 33875</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>WORSHIPFUL MASTER (D)</b> <b>Everett Charles Weeks</b> <b>216 Longview Road</b> <b>Sebring FL 33870</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SENIOR WARDEN (D)</b> <b>Michael Perry Byers</b> <b>2424 S Lake Latta Dr</b> <b>Avon Park FL 33822</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: Desha O. VanEvery **Desha O. VanEvery** **March 6, 03** **863 655 0277**

CR2E037 (10/02)