2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2000 8:00 am
Secretary of State
03-29-2000 90046 001 *6,125.00

DOCUMENT # C10045

1. Entity Name

FROSTPROOF LODGE NO. 229 FREE AND ACCEPTED MASON

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

DO NOT WRITE IN THIS SPACE

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 59-1801087 ☐ Applied For ☐ Not Applicable

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			11. DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JWD CARTER, DARREL Z SR 50 W. FROSTPROOF BAPTIST FROSTPROOF FL 33843-1929	☐ Delete	TITLE / NAME / STREET ADDR / CITY-ST-ZIP	JUNIOR WARDEN (D) Thomas Lee McNabb 318 Oleander Dr Lake Wales FL 33853	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCCLELLAND, JAMES E P.O. BOX 835 N/A FROSTPROOF FL 33843-0835	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	WMD LAMBERT, EDWARD T 17 COLLEGE DRIVE BABSON PARK FL 33827	☐ Delete	TITLE / NAME / STREET ADDRES / CITY-ST-ZIP	WORSHIPFUL MASTER (D) Willard Joseph Neff 407 West H St Frostproof FL 33843	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SWD NEFF, WILLARD J 407 WEST 8TH STREET FROSTPROOF FL 33843	☐ Delete	TITLE / NAME / STREET ADDRES / CITY-ST-ZIP	SENIOR WARDEN (D) Darrel Zane Carter Sr 50 W FROSTPROOF BAPTIST FROSTPROOF FL 33843	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GREENWOOD, LEONARD D 317 N. PALM AVENUE FROSTPROOF FL 33843-1819	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: X James E McClelland James E. McClelland 3/13/00 (863) 635-4183
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #