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1998 MAR 25 AM 11: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **C10048** (2)

1. Corporation Name

**TAVARES LODGE NO. 234 FREE AND ACCEPTED MASONS O
F FLORIDA**

Principal Place of Business

Mailing Address

**ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE FL 32202
US**

**ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE FL 32202
US**

3. Date Incorporated or Qualified

06/30/1992

4. FEI Number

59-6133689

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21
Suite, Apt. #, etc.

26
Suite, Apt. #, etc.

22
City & State

27
City & State

23
Zip Country

28
Zip Country

24
Country

29
Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

600002469576--3

83 -03/26/98--01084--001

84 City ******5083.75 ****61.25**

FL

85 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

2/13/98

12. OFFICERS AND DIRECTORS

TITLE **WMD** ☐ DELETE

NAME **ALLEN, GEORGE JR**
STREET ADDRESS **2835 WESTLAND RD.**
CITY-ST-ZIP **MOUNT DORA FL 32757-2439**

TITLE **MD** ☐ DELETE

NAME **COOK, EMORY C JR**
STREET ADDRESS **38309 W. SPRING LAKE BLVD.**
CITY-ST-ZIP **FRUITLAND PARK FL**

TITLE **JWD** ☐ DELETE

NAME **STAHL, HARVEY J**
STREET ADDRESS **675 BUCCANEER BLVD.**
CITY-ST-ZIP **TAVARES FL 32778-4595**

TITLE **TD** ☐ DELETE

NAME **BOLEVICH, VINCENT J**
STREET ADDRESS **31642 INDIANA AVE.**
CITY-ST-ZIP **TAVARES FL**

TITLE **SD** ☐ DELETE

NAME **HEINEMEYER, LEVI T**
STREET ADDRESS **1938 MAPLE CIR**
CITY-ST-ZIP **TAVARE FL 36**

TITLE **SD** ☐ DELETE

NAME **AUSTIN, RALPH M.**
STREET ADDRESS **3840 BRANCH AVE**
CITY-ST-ZIP **MOUNT DORA FL**

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

WORSHIPFUL MASTER (D)

George E Schueller Jr

34204 Hodges Rd

Leesburg Fl 34788

SECRETARY (D)

Levi Terrance Heinemeyer

1938 Maple Cir

Tavares FL 32778

SENIOR WARDEN (D)

Earl Moyer Friedeborn

34151 Hodges Rd

Leesburg Fl 34788

JUNIOR WARDEN (D)

Charles Asher Adams Jr

27814 Lisa Dr

Tavares FL 32778

TREASURER (D)

Vincent Joseph Bolevich

31642 Indiana Ave

Tavares Fl 32778

14. 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 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:

Levi T. Heinemeyer

2 25-98

904-354-2339

CR2E037 (10/97)