

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR -1 PM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **C10062** (3)

1. Corporation Name

**BOYNTON LODGE NO. 236 FREE AND ACCEPTED MASONS O
F FLORIDA**

100001419911

-03/02/95--01109--001

DO NOT WRITE IN THESE SPACES *130.00

Principal Place of Business

Mailing Address

C/O WILLIAM G WOLF
220 OCEAN ST
JACKSONVILLE FL 32202

C/O WILLIAM G WOLF
220 OCEAN ST
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified 3a. Date of Last Report
06/30/1992 **04/29/1994**

4. FEI Number Applied For
59-1980138 Not Applicable

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$88.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOLF, WILLIAM G.
220 OCEAN STREET
JACKSONVILLE FL 32202

81 SHEPPARD, ROY CONNOR
82 220 OCEAN STREET
83 JACKSONVILLE FL 32202
84

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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

By Roy Connor Sheppard

2/6/95

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	WM
NAME	LOTTO, JOSEPH G
STREET ADDRESS	PO BOX 59 N/A
CITY-ST-ZIP	LEBANONRTH NJ
TITLE	S
NAME	PHILPOTT, RICHARD E
STREET ADDRESS	1381 SW 27TH AVE
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	SW
NAME	KAUFMANN, OTTO S JR
STREET ADDRESS	6157 WESTERN WAY
CITY-ST-ZIP	LAKE WORTH FL
TITLE	JW
NAME	FRAZER, JAMES E
STREET ADDRESS	2711 CRANBROOK DR
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	T
NAME	TARTET, EVERETT R
STREET ADDRESS	639 SW 2ND AVE
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	WORSHIPFUL MASTER / D
1.2 NAME	OTTO SALINAS KAUFMANN JR
1.3 STREET ADDRESS	6157 WESTERN WAY
1.4 CITY-ST-ZIP	LAKE WORTH FL 33463-7639
2.1 TITLE	SENIOR WARDEN / D
2.2 NAME	JAMES EVANS FRAZER
2.3 STREET ADDRESS	2711 CRANBROOK DR.
2.4 CITY-ST-ZIP	BOYNTON BEACH FL 33436-5717
3.1 TITLE	JUNIOR WARDEN / D
3.2 NAME	ROY CESAR HERNANDEZ JR
3.3 STREET ADDRESS	3850 S. LAKE DRIVE
3.4 CITY-ST-ZIP	BOYNTON BEACH FL 33435-8544
4.1 TITLE	TREASURER / D
4.2 NAME	ANDERS JAMES FRIEND
4.3 STREET ADDRESS	3875 S LAKE DR
4.4 CITY-ST-ZIP	BOYNTON BEACH FL 33435-8543
5.1 TITLE	SECRETARY / D
5.2 NAME	RICHARD EDWARD PHILPOTT
5.3 STREET ADDRESS	1361 SW 27TH AVE
5.4 CITY-ST-ZIP	BOYNTON BEACH FL 33426-7827
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

3/1/95
WST

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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: *Otto S. Kaufmann, Jr.* Otto S. Kaufmann, Jr. -Worshipful Master 407-641-4191