

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **C10062 (3)**  
1. Corporation Name

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



Principal Place of Business: **C/O WILLIAM G WOLF 220 OCEAN ST JACKSONVILLE FL 32202**  
Mailing Address: **C/O WILLIAM G WOLF 220 OCEAN ST JACKSONVILLE FL 32202**

3. Date Incorporated or Qualified: **06/30/1992**  
3a. Date of Last Report: **03/01/1995**

2. Principal Place of Business: **21 Roy CONNOR SHEPPARD**  
2a. Mailing Address: **26 Roy CONNOR SHEPPARD**

4. FEI Number: **59-1980138**  
Applied For:  Not Applicable

22. City & State: **27**

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

23. Zip: **25** Country: **29**

6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**

24. Zip: **25** Country: **29**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent: **SHEPPARD, ROY CONNOR 220 OCEAN STREET JACKSONVILLE FL 32202**

10. Name and Address of New Registered Agent: **81 Name**  
**82 Street Address (P.O. Box Number is Not Acceptable)**  
**83 800001778058**  
**-04/09/96--01011--001**  
**84 City** **\*\*\*1960.00** **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 this 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]*

NOTE: Registered Agent signature required when registering. DATE: **2/16/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>WMD</b>	1.1 TITLE	<b>WORSHIPFUL MASTER (D)</b>
NAME	<b>KAUFMANN, OTTO S JR</b>	1.2 NAME	<b>JAMES EVANS FRAZER</b>
STREET ADDRESS	<b>6157 WESTERN WAY</b>	1.3 STREET ADDRESS	<b>2711 CRANBROOK DR.</b>
CITY-ST-ZIP	<b>LAKE WORTH FL 33463-7639</b>	1.4 CITY-ST-ZIP	<b>BOYNTON BEACH FL 33436-5717</b>
TITLE	<b>SWD</b>	2.1 TITLE	<b>SENIOR WARDEN (D)</b>
NAME	<b>FRAZER, JAMES E</b>	2.2 NAME	<b>ROY CESAR HERNANDEZ JR</b>
STREET ADDRESS	<b>2711 CRANBROOK DR.</b>	2.3 STREET ADDRESS	<b>3850 S. LAKE DRIVE</b>
CITY-ST-ZIP	<b>BOYNTON BEACH FL 33436-5717</b>	2.4 CITY-ST-ZIP	<b>BOYNTON BEACH FL 33435-8544</b>
TITLE	<b>JWD</b>	3.1 TITLE	<b>JUNIOR WARDEN (D)</b>
NAME	<b>HERNANDEZ, ROY C</b>	3.2 NAME	<b>KENNETH JAY AARON</b>
STREET ADDRESS	<b>3850 SOUTH LAKE DRIVE</b>	3.3 STREET ADDRESS	<b>1002 S.W. 24TH AVE.</b>
CITY-ST-ZIP	<b>BOYNTON BEACH FL 33435-8544</b>	3.4 CITY-ST-ZIP	<b>BOYNTON BEACH FL 33426</b>
TITLE	<b>TD</b>	4.1 TITLE	<b>TREASURER (D)</b>
NAME	<b>FRIEND, ANDERS J</b>	4.2 NAME	<b>SAMUEL WHITMAN WALL JR</b>
STREET ADDRESS	<b>3875 S LAKE DR.</b>	4.3 STREET ADDRESS	<b>2018 S FEDERAL HWY</b>
CITY-ST-ZIP	<b>BOYNTON BEACH FL 33435-8543</b>	4.4 CITY-ST-ZIP	<b>BOYNTON BEACH FL 33435-6917</b>
TITLE	<b>SD</b>	5.1 TITLE	<b>SECRETARY (D)</b>
NAME	<b>PHILPOTT, RICHARD E</b>	5.2 NAME	<b>ANDERS JAMES FRIEND</b>
STREET ADDRESS	<b>1361 SW 27TH AVE.</b>	5.3 STREET ADDRESS	<b>3875 S LAKE DR</b>
CITY-ST-ZIP	<b>BOYNTON BEACH FL 33426-7827</b>	5.4 CITY-ST-ZIP	<b>BOYNTON BEACH FL 33435-8543</b>
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

**WORSHIPFUL MASTER (D)**  
**JAMES EVANS FRAZER**  
**2711 CRANBROOK DR.**  
**BOYNTON BEACH FL 33436-5717**

**SENIOR WARDEN (D)**  
**ROY CESAR HERNANDEZ JR**  
**3850 S. LAKE DRIVE**  
**BOYNTON BEACH FL 33435-8544**

**JUNIOR WARDEN (D)**  
**KENNETH JAY AARON**  
**1002 S.W. 24TH AVE.**  
**BOYNTON BEACH FL 33426**

**TREASURER (D)**  
**SAMUEL WHITMAN WALL JR**  
**2018 S FEDERAL HWY**  
**BOYNTON BEACH FL 33435-6917**

**SECRETARY (D)**  
**ANDERS JAMES FRIEND**  
**3875 S LAKE DR**  
**BOYNTON BEACH FL 33435-8543**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the reduced filing fee. I 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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **CS 4/8/96**  
Phone: **904-354-2339**

CR2E037 (12/95)