

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90278 045 \*\*\*\*61.25

**DOCUMENT # C10063**

1. Entity Name  
**CLEARWATER LODGE NO. 127 FREE AND ACCEPTED  
MASONS OF FLORIDA**



Principal Place of Business  
**ROY CONNOR SHEPPARD  
220 OCEAN ST.  
JACKSONVILLE, FL 32202 US**

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

**50006121**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

02022006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-0794113**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent  
**SHEPPARD, ROY CONNOR  
220 OCEAN ST  
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 \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2006**

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		AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIRENBAUM, MARK WM 1448 ROSETREE CT CLEARWATER, FL 337642833 <input checked="" type="checkbox"/> Delete	WORSHIPFUL MASTER (D) Sam Lampson 1447 Springsdale St Clearwater FL 33755-2745 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWD BIRENBAUM, MARK 1448 ROSETREE CT CLEARWATER, FL 337642833 <input checked="" type="checkbox"/> Delete	SENIOR WARDEN (D) Jon Paul Vondereau 2291 Gulf To Bay Blvd Clearwater FL 33765-4017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JWD ARTHUR VONWERDER, VERNON 9396 120TH ST N SEMINOLE, FL 337722644 <input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CLAY AVANCE, EDWARD 7815 TENDY COURT NEW PORT RICHEY, FL 346554280 <input checked="" type="checkbox"/> Delete	SECRETARY (D) Russell Paul LeMar 1007 24th Ave N Saint Petersburg FL 33704-3242 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VPMWERDER, VERMPM A SW 9396 120TH ST N SEMINOLE, FL 337722644 <input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIPOS, JOSEPH A 2480 TREEMONT WAY DUNEDIN, FL 346987323 <input checked="" type="checkbox"/> Delete	TREASURER (D) Mark Birenbaum 1448 Rosetree Ct Clearwater FL 33764-2833 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Russell P LeMar Russell P LeMar 3/14/06 727-798-6126  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #