

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2005 8:00 am
Secretary of State

05-17-2005 90012 028 ****61.25

DOCUMENT # C10071					
1. Entity Name ANCHOR LODGE NO. 182 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		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 23-7193179	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WMD <input checked="" type="checkbox"/> Delete O'DELL, TERRY JAY 2108 PATTERSON AVE. KEY WEST, FL 330403717				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input type="checkbox"/> Delete WEITZEL, CHARLES 150 SEALANE TAMARAC PK KEY WEST, FL 33040				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Delete MARIBONA, MICHAEL PO BOX 2370 N/A KEY WEST, FL 33040				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SWD <input checked="" type="checkbox"/> Delete WILLIAM ANSELL, CHARLES II 2809 FLAGLER AVE. KEY WEST, FL 330404001				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JWD <input checked="" type="checkbox"/> Delete CURRY, JOHN M 1300 15TH CT., #24 KEY WEST, FL 33040				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
WORSHIPFUL MASTER (D) <input checked="" type="checkbox"/> Addition Charles William Ansell II 2809 Flagler Ave Key West FL 33040-4001					
SENIOR WARDEN (D) <input checked="" type="checkbox"/> Addition John M Curry 1300 15th Ct #24 Key West FL 33040-4104					
JUNIOR WARDEN (D) <input checked="" type="checkbox"/> Addition Michael Maribona 133 SW East Denville Cir Port Saint Lucie FL 34953-5942					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
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: <u>Michael Maribona</u> <u>5/8/05</u> <u>3055878841</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					