2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

May 25, 2006 8:00 am Secretary of State DOCUMENT # C10081 05-25-2006 90015 004 ****61.25 1 Entity Name GRAND RIDGE LODGE NO. 169 FREE AND ACCEPTED MASONS OF FLORIDA Principal Place of Business Mailing Address C/O ROY CONNOR SHEPPARD C/O ROY CONNOR SHEPPARD 220 OCEAN ST 220 OCEAN ST JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022006 CR2E037 (11/05) Chg-NP 4. FEI Number 23-7526440 City & State City & State Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHEPPARD, ROY CONNOR Street Address (P.O. Box Number is Not Acceptable) 220 OCEAN ST JACKSONVILLE, FL 32202 Zip Code City FI 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2006 OFFICERS AND DIRECTORS D DIRECTORS IN 10 10. -SECRETARY (D) S ☐ Change Addition TITLE Delete Shannon Anthony Ganstine DEATON, JOHN W NAME BiÖ Morgan Ave 8110 HAWLEY STREET STREET ADDRESS CITY-ST-ZIP SNEADS, FL 32460 Chattahoochee FL 32324-1727 JWD JUNIOR WARDEN Change ☐ Addition TITLE Delete (0) ALEXANDER, JERRY L NAME Charles A Dickson 2004 GREEN AVE STREET ADDRESS 1926 Inwood Rd SNEADS, FL 32460 CITY-ST-ZIP Grand Ridge FL 32442-4010 WMD ☐ Change Addition TITLE ☐ Delete EDWARDS, WALTER GLENN NAME NAME STREET ADDRESS 7937 OLD SPANISH TRI STREET ADDRESS CITY-ST-ZIP SNEADS, FL 32460 CITY-ST-7IP Delete ☐ Change ☐ Addition SWD TITLE TITLE DICKSON, CHARLES A. NAME NAME 1926 INWOOD ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GRAND RIDGE, FL 32442 CITY-ST-ZIP TREASURER (D) Change TITLE Addition ☐ Delete TITLE John Wesley Deaton NAME NAME STREET ADDRESS STREET ADDRESS Siio Hawley St CITY-ST-ZIP CITY-ST-ZIP Sneadz FL 32460-2447 ☐ Change

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 endress, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

□ Delete

NAME

STREET-ADDRESS

☐ Addition

FILED