## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 12, 2004 8:00 am Secretary of State DOCUMENT # C10086 04-12-2004 90257 050 \*\*\*\*61.25 1. Entity Name DR. FELIX VARELA LODGE NO. 64 FREE AND ACCEPTED MASONS OF FLORIDA Principal Place of Business Mailing Address C/O ROY CONNER SHEPPARD C/O ROY CONNER 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. 03042004 Chg-NP CR2E037 (10/03) 4. FEI Number 23-7526367 City & State City & State Applied For Not Applicable Zip Country Country \$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 Name SHEPPARD, ROY CONNOR 220 OCEAN STREET Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE, FL 32202 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 D Delete TITLE WORSHIPFUL MASTER (D) TITI F RAMIREZ, JOSE L NAME NAME George Lopez 1217 ELIZA STREET STREET ADDRESS STREET ADDRESS O Box 2979 **N/A** CITY-SI-709 KEY WEST, FL 330403421 CITY-ST-ZIP Key West\_F1 33040-2979 D Delete TITLE TITLE Addition Change SENIOR WARDEN NAME WILLIAM, BOYD NAME Roberto Lorenzo Perez STREET ADDRESS 2931 HARRIS AVE STREET ADDRESS 424 3330 NORTHSIDE DR KEY WEST, FL 33040 CITY-ST-ZIP CITY-ST-ZIP KEY WEST FL 33040 TITLE TD Delete TITLE ☐ Change Addition NAME DORRIBO, MANUEL J NAME JUNIOR WARDEN (D) Leonid D Salcedo STREET ADDRESS 9501 SW 155TH AVE STREET ADDRESS . MIAMI, FL 331961117 CITY-ST-ZIP CITY-ST-ZIP 1300 Douglas Circle SD Delete TITLE TITLE KEY WEST FL 33040-4536 ☐ Change ☐ Addition GONZALEZ, MANUEL NAME NAME (D) SECRETARY STREET ADDRESS PO BOX 4123 N/A STREET ADDRESS Jose F Rodriquez CITY-ST-ZIP CITY-ST-ZIP KEY WEST, FL 330414123 3705 Donald Ave Delete TITLE Change ☐ Addition TITLE Key West F1 33040-4409 TUYA, OSCAR NAME NAME 139 4TH ST STREET ADDRESS STREET ADDRESS KEY WEST, FL 33040

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.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITI F

NAME

SIGNATURE:

CITY-ST-ZIP\_

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

☐ Delete

ONRIGUEZ Sec.

☐ Change

☐ Additión

FILED