

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90256 010 ****61.25

DOCUMENT # C10103

1. Entity Name
HERNANDO LODGE NO. 97 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

13000104



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03052004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1657220

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE, FL 32202

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

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
Due by May 1, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
COLLINS, THOMAS A
850 MOONLIGHT LN
BROOKSVILLE, FL 346013014 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
John Clifford Bates Jr
21950 Squirrel Prairie Rd
Brooksville FL 34610-2300

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WMD
MERCEL O'DELL, GERALD
1205 DOVE LANE
BROOKSVILLE, FL 34601 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SENIOR WARDEN (D) ☒ Change ☐ Addition
Jeffrey David Bunn
9025 Cooper Terr
Brooksville FL 34601-5471

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SWD
CLIFFORD BATES, JOHN
21950 SQUIRREL PRAIRIE RD
SPRING HILL, FL 34610 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JUNIOR WARDEN (D) ☒ Change ☐ Addition
Gerald Mercel O'Dell
1205 DOVE LANE
BROOKSVILLE FL 34601

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JWD
DAVID BUNN, JEFFREY
9025 COOPER TERR
BROOKSVILLE, FL 34601 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
PERKINS, KENNETH RAY
3077 MEETINGHOUSE LANE
BROOKSVILLE, FL 346018315 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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: **KENNETH R. PERKINS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03/30/04

352-796-8093