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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR - 1 PH 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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02/02/95 -- 01109--001
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\$11.1550 PER PAGE 130.00

DOCUMENT # C10107 (6)
1. Corporation Name
BELLEVIEW LODGE NO. 95 FREE AND ACCEPTED MASONS
OF FLORIDA

Principal Place of Business Mailing Address
C/O WILLIAM G. WOLF 220 OCEAN ST. JACKSONVILLE FL 32202
C/O WILLIAM G. WOLF 220 OCEAN ST. JACKSONVILLE FL 32202

2. Principal Place of Business 2a. Mailing Address
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.
22. City & State 27. City & State
23. Zip 28. Zip Country 29. Country 30. Country

3. Date Incorporated or Qualified 06/30/1992 Date of Last Report 04/29/1994
4. FEI Number 23-7526391 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
WOLF, WILLIAM G.
220 OCEAN STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent
81 Name SHEPPARD, ROY CONNOR
82 Street Address 220 OCEAN STREET
83 JACKSONVILLE FL 32202
84 City

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.050, Florida Statutes.
SIGNATURE *Roy Connor Sheppard* DATE 2/6/95

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
WM FAIL, JAMES T PO BOX 729 N/A OKLAWAHA FL
S LIVINGSTON, JAMES W PO BOX 25 N/A CANDLER FL
SW LIVINGSTON, JAMES R 7837 S.E. COUNTY HWY. 42 SUMMEVILLE FL
JW OLIVER, JABY L 12525 S.E. 107TH ST OKLAWAHA FL
T LAUGESSEN, BERNHARD E 14711 S.E. 155TH ST WEIRSDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE WORSHIPFUL MASTER/D
1.2 NAME JAMES RONALD LIVINGSTON
1.3 STREET ADDRESS 7837 S.E. COUNTY HWY. 42
1.4 CITY-ST-ZIP SUMMERFIELD FL 34491-5313
2.1 TITLE SECRETARY/D
2.2 NAME JAMES WILLIAM LIVINGSTON
2.3 STREET ADDRESS PO BOX 25 N/A
2.4 CITY-ST-ZIP CANDLER FL 32111-0025
3.1 TITLE SENIOR WARDEN/D
3.2 NAME JABY LEROY OLIVER
3.3 STREET ADDRESS 12525 S.E. 107TH ST.
3.4 CITY-ST-ZIP OKLAWAHA FL 32179
4.1 TITLE JUNIOR WARDEN/D
4.2 NAME WILLET ALBRIGHT BOYER III
4.3 STREET ADDRESS P. O. BOX 527 N/A
4.4 CITY-ST-ZIP WEIRSDALE FL 32195-0527
5.1 TITLE TREASURER/D
5.2 NAME BERNHARD EDWIN LAUGESSEN
5.3 STREET ADDRESS 14711 S.E. 155TH ST.
5.4 CITY-ST-ZIP WEIRSDALE FL 32195-2213

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: *James W. Livingston* DATE Feb 10, 95 DAYTIME (Area) 904 4274109