2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

[redacted]
03-16-2007 90040 021 ****61.25
FILED C10107

2007 MAR 26 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

20007730

DOCUMENT # C10107

1. Entity Name
BELLEVIEW LODGE NO. 95 FREE AND ACCEPTED MASONS OF FLORIDA

Principal Place of Business	Mailing Address
ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US	ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US

01182007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7526391 ☐ Applied For ☐ Not Applicable

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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	WMD OLIVER, JABY L P.O. BOX 4117 BELLEVIEW, FL 344214117	☒ Delete	TREASURER (D) Jaby LeRoy Oliver P O Box 4117 N/A Belleview FL 34421-4117	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SW PISANI, JOHN P 6271 SE 121ST PL BELLEVIEW, FL 344205215	☒ Delete	WORSHIPFUL MASTER (D) John Paul Pisani 6271 SE 121st Pl Belleview FL 34420-5215	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WHALEY, STEVE W 12188 SE 61ST CT BELLEVIEW, FL 344205281	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JW SULLIVAN, PAUL W P.O. BOX 91 BELLEVIEW, FL 344210091	☒ Delete	SENIOR WARDEN (D) Paul William Sullivan P O Box 91 N/A Belleview FL 34421-0091	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FIFIELD, DEAN J 4960 SE 130TH ST SUMMERFIELD, FL 34491	☒ Delete	JUNIOR WARDEN (D) William Worth Green 10079 SE 127th St Belleview FL 34420-7083	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

D 3/30/07

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 address, with all other like empowered.

SIGNATURE: X Steve W. Whaley Steve W. Whaley 3-12-07 352-804-5179
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #