2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2008 8:00 am

SIGNATURE:

| | | | | ₇ Secretary of State |
|---|--|------------------------------------|--|---|
| DOCUMENT # C10107 1. Entity Name BELLEVIEW LODGE NO. 95 FREE AND ACCEPTED MASONS OF FLORIDA | | | | 04-02-2008 90023 036 ****61.25 |
| Principal Place of Business ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US Mailing Address ROY CONNOR SHEPPAR 220 OCEAN ST. JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 | | • | | |
| 2. Principal Place of Business - No P.O. Box # 3. Mailing | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 01212008 Chg-NP CR2E037 (12/06) |
| City & State | 9 | City & State | | 4. FEI Number Applied For 23-7526391 Not Applicable |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| | 6. Name and Address of Current F | Registered Agent | | 7. Name and Address of New Registered Agent |
| SHEPPARD, ROY CONNOR 220 OCEAN STREET JACKSONVILLE, FL 32202 Lynn, Richard, Edward Street Street Jacksonville, Florida 32202 | | | | |
| | · · · · · · · · · · · · · · · · · · · | 28 | G P | ES CETO |
| 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. Tam 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, 2008 | 9. Election Camp Trust Fund Cor | · · · - | \$5.00 May Be Added to Fees Make check payable to Florida Department of State |
| 10. | OFFICERS AND DIR | ECTORS | 11. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD OLIVER, JABY L P.O. BOX 4117 BELLEVIEW, FL 344214117 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | WMD PISANI, JOHN P 6271 SE 121ST PL BELLEVIEW, FL 344205215 | Delete | NAME TE | NIOR WARDEN (D) Change MAddition d MK Mullins 575 SE 47th Ave |
| NAME STREET ADDRESS CITY-ST-ZIP | SD WHALEY, STEVE W 12188 SE 61ST CT BELLEVIEW, FL 344205281 | ☐ Delete | NAME STREET ADDRESS CITY-ST-ZIP | 1.1.e.v.i.ew_FL_34420-5018 Change Addition |
| TITLE | | Delete | TITLE WOR | SHIPFUL MASTER (D) ★Change □ Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | SWD SULLIVAN, PAUL W P.O. BOX 91 BELLEVIEW, FL 344210091 | Delete | NAME FOLL STREET ADDRESS FOLL CITY-ST-ZIP | ul William Sullivan D Box 9i <i>N/A</i> |
| STREET ADDRESS | SULLIVAN, PAUL W P.O. BOX 91 | Delete | NAME FOR LESTREET ADDRESS FOR CITY-ST-ZIP BBB. TITLE JU! NAME STREET ADDRESS ROT CITY-ST-ZIP BBC. | JI William Sullivan J Box 9i |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | SULLIVAN, PAUL W P.O. BOX 91 BELLEVIEW, FL 344210091 JWD GREEN, WILLIAM W 10079 SE 127TH ST BELLEVIEW, FL 344207083 | Delete | NAME FOR LEST ADDRESS CITY-ST-ZIP BELLIN CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP | JI William Sullivan J Box 9i N/A Lleview_FL_34421-0091 HIDR WARDEN (D) ☐ Change ★Addition Hald Lewiz Malone Jr |