

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **C10108** (4)

1. Corporation Name

TRILBY LODGE NO. 141 FREE AND ACCEPTED MASONS OF FLORIDA



Principal Place of Business

Mailing Address

C/O WILLIAM O WOLF
220 OCEAN ST.
JACKSONVILLE FL 32202

C/O WILLIAM O WOLF
220 OCEAN ST.
JACKSONVILLE FL 32202

3. Date Incorporated or Qualified
06/30/1992

3a. Date of Last Report
03/22/1995

2. Principal Place of Business

2a. Mailing Address

21 **Roy Connor Sheppard**

26 **Roy Connor Sheppard**

4. FEI Number

23-7526425

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE FL 32202**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**400001766294
-04/02/96--01061--001**

84 City

*****5083.75**

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Roy Connor Sheppard

(NOTE: Registered Agent signature required when reinstating)

DATE

2/16/96

12. OFFICERS AND DIRECTORS

TITLE	WMD	<input type="checkbox"/> DELETE
NAME	JORDAN, TOMMY N JR	
STREET ADDRESS	40500 MESSICK RD.	
CITY - ST - ZIP	DADE CITY FL 33525	
TITLE	SWD	<input type="checkbox"/> DELETE
NAME	STANLEY, RONALD E	
STREET ADDRESS	12617 GREEN OAK LANE	
CITY - ST - ZIP	DADE CITY FL 33525-1055	
TITLE	JWD	<input type="checkbox"/> DELETE
NAME	BURKETT, WILLIAM P	
STREET ADDRESS	35430 RUFFING RD.	
CITY - ST - ZIP	DADE CITY FL 33525	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BLACK, WALTER E	
STREET ADDRESS	P.O. BOX 27 N/A	
CITY - ST - ZIP	TRILBY FL 33593-0027	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	KING, LOUIS A	
STREET ADDRESS	PO BOX 8 N/A	
CITY - ST - ZIP	TRILBY FL 33593-0008	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13.

1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

**WORSHIPFUL MASTER (D)
RONALD EDWARD STANLEY
12617 GREEN OAK LANE
DADE CITY FL 33525-1055
SENIOR WARDEN (D)
WILLIAM PATE BURKETT JR
35430 RUFFING RD
DADE CITY FL 33525
JUNIOR WARDEN (D)
JOHN HENRY MYRICK
PO BOX 1264 N/A
DADE CITY FL 33526-1264
TREASURER (D)
DON TRUXTON LAQUIRE
4977 MERLIN CIR
DADE CITY FL 33525-9127
SECRETARY (D)
LAWRENCE PAYTON PITTS JR
33903 TRILBY RD
DADE CITY FL 33525**

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 199.032, 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: *Ronald Stanley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/96 **813-991-7068**
Date Daytime Phone #

CR2E037 (12/95)