

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # C10119

1. Entity Name

STAR LODGE NO. 78 FREE AND ACCEPTED MASONS OF FL

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7163084

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 C
220 OCEAN ST
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete
NAME THOMPSON, CHARLES L
STREET ADDRESS 106 ASPEN CIRCLE
CITY-ST-ZIP SEMINOLE FL 33777

TITLE WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
NAME Donald Raymond Langworthy
STREET ADDRESS 807 Lake Palm Dr.
CITY-ST-ZIP Largo FL 33771-3235

TITLE JWD ☒ Delete
NAME ALBRIGHT, BRENT W
STREET ADDRESS 7100 ULMERTON RD LOT 668
CITY-ST-ZIP LARGO FL 33771

TITLE SENIOR WARDEN (D) ☒ Change ☐ Addition
NAME Brent W Albright
STREET ADDRESS 7100-Ulmerton-Rd-Lot-668
CITY-ST-ZIP Largo FL 33771

TITLE WMD ☒ Delete
NAME STELLRECHT, J. PAUL
STREET ADDRESS 12404 93RD AVE N
CITY-ST-ZIP SEMINOLE FL 33772

TITLE JUNIOR WARDEN (D) ☒ Change ☐ Addition
NAME Michael Todd Martinetto
STREET ADDRESS 8949 FAIRWEATHER DR
CITY-ST-ZIP LARGO FL 33773

TITLE TD ☐ Delete
NAME SALLIOTTE, DENNIS R
STREET ADDRESS 817 GULF BLVD
CITY-ST-ZIP INDIAN ROCKS BEACH FL 33785

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

TITLE SWD ☒ Delete
NAME LONGWORTHY, DONALD R
STREET ADDRESS 807 LAKE PALM DR
CITY-ST-ZIP LARGO FL 33771-3235

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Charles L. Thompson, Secretary
3/19/01

727-398-6659
727-585-2485
6668

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)