

FILED
Apr 13, 2005 8:00 am
Secretary of State

20031295

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|---|--|---------|--|---|--|---------|--|
| DOCUMENT # C10119 1. Entity Name STAR LODGE NO. 78 FREE AND ACCEPTED MASONS OF FLORIDA | | | | Secretary of State 04-13-2005 90035 006 *****61.25 | | | |
| Principal Place of Business ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US | | | | Mailing Address 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 | |
| 5. Name and Address of Current Registered Agent SHEPPARD, ROY C 220 OCEAN ST JACKSONVILLE, FL 32202 | | | | 7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2005 | | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | | |
| 10. OFFICERS AND DIRECTORS | | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | | |
| SD THOMPSON, CHARLES L 106 ASPEN CIRCLE SEMI NOLE, FL 33777 <input type="checkbox"/> | | | | WORSHIPFUL MASTER (D) <input checked="" type="checkbox"/> Don Horton Harwood 1923 Tropic Blvd N Largo FL 33770-2108 | | | |
| D WEMERT, JOHN W 5890 63RD TERR PINELLAS PARK, FL 33781 <input checked="" type="checkbox"/> | | | | SENIOR WARDEN (D) <input checked="" type="checkbox"/> Raymond Charles Wampole 16416 US Highway 19 N 535 Clearwater FL 33764-8708 | | | |
| D WAMPOLE, RAYMOND C 16416 US 19 N LOT 535 CLEARWATER, FL 33764 <input checked="" type="checkbox"/> | | | | JUNIOR WARDEN (D) <input checked="" type="checkbox"/> Steven Armand Buskirk 17090 Belleair Forest Dr Clearwater FL 33756-1501 | | | |
| TD SALLOTTE, DENNIS R 817 GULF BLVD NORTH ROCKS BEACH, FL 33785 <input checked="" type="checkbox"/> | | | | | | | |
| D LANGWORTHY, DONALD R 807 LAKE PALM DR LARGO, FL 33771 <input type="checkbox"/> | | | | | | | |
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| 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: <u>Charles L. Thompson</u> <u>Charles L. Thompson</u> 3/31/05 727-585-2485 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #) | | | | | | | |