## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # C10122

1. Entity Name
APALACHICOLA LODGE NO. 76 FREE AND ACCEPTED MASONS OF FLORIDA



Principal Place of Business C/O ROY CONNOR SHEPPARD 220 OCEAN ST JACKSONVILLE, FL 32202		Mailing Address C/O ROY CONNOR SHEPPARD 220 OCEAN ST JACKSONVILLE, FL 32202		 			
2. Principal Place of Business 3.		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02012006 Ch	ig-NP CR2E037 (	11/05)	
City & State		City & State		4. FEI Number 23-752637	4. FEI Number Applied For 23-7526374 Not Applicable		
Zip	Country	Zíp	Country	5. Certificate of Sta		.75 Additional Required	
	6. Name and Address of Current R	egistered Agent		7. Name and Add	ress of New Registered Age	nt	
			Name				
SHEPPARD, ROY CONNOR 220 OCEAN ST JACKSONVILLE, FL 32202			Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
			City FL Zip Code		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.	Signature, typed or printed name of registered agent are	d title if applicable. (NOTE: I	Registered Agent signature re	equired when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check pa Florida Departme		
10.	——————————————————————————————————————	Trust Fund Co		Added to Fees	Florida Departme	ent of State CTORS IN 10	
<b>10.</b> TITLE	Due by May 1, 2006	Trust Fund Co	entribution.	Added to Fees	Florida Departme	ent of State CTORS IN 10	
	Due by May 1, 2006 OFFICERS AND DIRE	Trust Fund Co	ntribution.	Added to Fees  ADDITIONS/CHANG	Florida Departments of the STER (D)	ent of State CTORS IN 10	
TITLE	OFFICERS AND DIRE	Trust Fund Co	11. TITLE	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Wil	Florida Departments TO OFFICERS AND DIRECT MASTER (D)	ent of State CTORS IN 10	
TITLE NAME	OFFICERS AND DIRE SWD MOSES, CHARLIE WILLIE	Trust Fund Co	11. TITLE NAME	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S	Florida Departments of OFFICERS AND DIRECT MASTER (D)	CTORS IN 10  Change Addition	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DIRE SWD MOSES, CHARLIE WILLIE 63 SHULETR ST EASTPOINT, FL 323283460	Trust Fund Co	ntribution.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S Egitpoint F	Florida Departments AND DIRECT MASTER (D)  1 ie Moses  1 32328-3460	CTORS IN 10 Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRE SWD MOSES, CHARLIE WILLIE 63 SHULETR ST EASTPOINT, FL 323283460 WM	Trust Fund Co	ntribution.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S Eastpoint F SENIOR WARE	Florida Departments ESTO OFFICERS AND DIRECT MASTER (D) 1 ie Moses 5t L 32328-3460 EN (D)	CTORS IN 10 Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRE SWD MOSES, CHARLIE WILLIE 63 SHULETR ST EASTPOINT, FL 323283460 WM WOODROW DUNCAN, CARL	Trust Fund Co	ntribution.   11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S Eastpoint F SENIOR WARE	Florida Departments of the Model (D)	CTORS IN 10 Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRE SWD MOSES, CHARLIE WILLIE 63 SHULETR ST EASTPOINT, FL 323283460 WM WOODROW DUNCAN, CARL 1416 BLUFF RD.	Trust Fund Co	ntribution.   11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S Eastpoint F SENIOR WARL Elton Rock F O Box SS(	Florida Departments TO OFFICERS AND DIRECT MASTER (D)  I ie Morer  L 32328-3460  DEN (D)  ie Moore  ) N/A	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2006  OFFICERS AND DIRE  SWD  MOSES, CHARLIE WILLIE 63 SHULETR ST  EASTPOINT, FL 323283460  WM  WOODROW DUNCAN, CARL 1416 BLUFF RD. APALACHICOLA, FL 323201010	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S Eastpoint F SENIOR WARL Elton Rock F O Box SS(	Florida Departments of the Model (D)	CTORS IN 10 Change Addition Thange Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2006  OFFICERS AND DIRE  SWD  MOSES, CHARLIE WILLIE 63 SHULETR ST  EASTPOINT, FL 323283460  WM  WOODROW DUNCAN, CARL 1416 BLUFF RD. APALACHICOLA, FL 323201010  JWD  MOORE, ELTON ROCKIE P.O. BOX 580	Trust Fund Co	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees  ADDITIONS/CHANGE WORSHIPFUL Charlie Will 63 Shuler S Eastpoint F SENIOR WARE Elton Rock F O Box 580 Eastpoint F JUNIOR WARE JOHN Willie	Florida Departments ESTO OFFICERS AND DIRECT MASTER (D) 1 ie Moxes 5t 5t 2EN (D) ie Moore 0 N/A 5L 32328-0580 2EN (D)	CTORS IN 10 Change Addition  Thange Addition	
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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.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

CARL W. DUNGAN

**FILED** 

May 04, 2006 8:00 am Secretary of State

05-04-2006 90246 005 \*\*\*\*61.25

Daytime Phone #