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FILED

Mar 24 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # C10124 (1)

1. Corporation Name

OLETTA LODGE NO. 145 FREE AND ACCEPTED MASONS OF  
FLORIDA

Principal Place of Business

Mailing Address

C/O ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE FL 32202C/O ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE FL 32202-3218

3. Date Incorporated or Qualified

06/30/1992

3a. Date of Last Report

04/02/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City &amp; State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City &amp; State

28

Zip

Country

29

30

4. FEI Number

23-7215289

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

SHEPPARD, ROY CONNOR  
220 OCEAN STREET  
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-3-97

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETENAME PELLON, BLAS  
STREET ADDRESS 3121 SW 23RD ST  
CITY-ST-ZIP MIAMI FL 33145-3117TITLE D ☐ DELETENAME FINEBERG, GORDON  
STREET ADDRESS 6601 S.W. 116TH CT  
CITY-ST-ZIP MIAMI FL 33173TITLE D ☐ DELETENAME SUAREZ, ALEXANDER  
STREET ADDRESS 5340 SW 143RD CT  
CITY-ST-ZIP MIAMI FL 33175TITLE DT ☐ DELETENAME RATHBURN, GARY R  
STREET ADDRESS 600 RAVEN AVENUE  
CITY-ST-ZIP MIAMI SPRINGS FL 33166-3953TITLE DS ☐ DELETENAME COLLARD, FENTON W  
STREET ADDRESS 6260 NW 39TH TERRACE  
CITY-ST-ZIP MIAMI SPRINGS FL 33166-7078TITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE WORSHIPFUL MASTER D  
12 NAME Gordon H Fineberg  
13 STREET ADDRESS 6601 SW 116th Ct #105  
14 CITY-ST-ZIP Miami FL 3317321 TITLE SENIOR WARDEN D  
22 NAME Alexander Suarez  
23 STREET ADDRESS 5340 SW 143rd Ct  
24 CITY-ST-ZIP Miami FL 3317531 TITLE JUNIOR WARDEN D  
32 NAME Michael Charles Green  
33 STREET ADDRESS 9133 SW 72nd Ave Apt J-1  
34 CITY-ST-ZIP Miami FL 33156-163441 TITLE TREASURER D  
42 NAME Gary Ray Rathburn  
43 STREET ADDRESS 600 Raven Avenue  
44 CITY-ST-ZIP Miami Springs FL 33166-395351 TITLE SECRETARY D  
52 NAME Fenton William Collard  
53 STREET ADDRESS 6260 NW 39th Terrace  
54 CITY-ST-ZIP Miami Springs FL 33166-7078

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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 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:

Gordon H. Fineberg  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 8004165

CR2E037 (9/96)