## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# C10125

FILED May 03, 2004 Secretary of State

Entity Name: LAWTEY LODGE NO. 189 FREE AND ACCEPTED MASONS OF FLORIDA

**Current Principal Place of Business: New Principal Place of Business:** C/O ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** C/O ROY CONNOR SHEPPARD 220 OCEAN ST JACKSONVILLE, FL 32202 FEI Number: 23-7526450 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHEPPARD, ROY CONNOR 220 OCEAN ST JACKSONVILLE, FL 32202 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: WMD () Change () Addition () Delete LINGOLD, JAMES B Name: Name: RT. 2 BOX 2264 Address: Address: City-St-Zip: STARKE, FL 32091 City-St-Zip: Title: SD () Delete Title: () Change () Addition REHBERG, ROBERT W Name: Name: Address: RT. 4. BOX 256 Address: City-St-Zip: STARKE, FL 320919409 City-St-Zip: Title: SWD () Delete Title: () Change () Addition CATES, RICHARD E Name: Name: Address: PO BOX 263 Address: City-St-Zip: LAWTEY, FL 32058 City-St-Zip: Title: JWD ( ) Delete Title: () Change () Addition Name: SIEMER III, OTTO F Name: 801 FREDERICK ST. Address: Address: City-St-Zip: STARKE, FL 32091 City-St-Zip: Title: () Delete Title: () Change () Addition GASKINS, JOHN P Name: Name: RT 4 BOX 369 Address: Address: City-St-Zip: STARKE, FL 320919412 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W. REHBERG SEC 05/03/2004