

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 91003 001 *1,470.00

DOCUMENT # C10125

1. Entity Name

**LAWTEY LODGE NO. 189 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. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **23-7526450**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SHEPPARD, ROY CONNOR
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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**WMD
REAGAN, RONALD G
514 W ADKINS ST
STARKE FL 32091** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
REHBERG, ROBERT W
RT. 4, BOX 256
STARKE FL 32091-9409** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SWD
LINGOLD, JAMES B
RT 2 BOX 2264
STARKE FL 32091** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**JWD
MCCREA, JAMES O
770 GLENDALE ST
STARKE FL 32091** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
GASKINS, JOHN P
RT 4 BOX 369
STARKE FL 32091-9412** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
James Brian Lingold
RT 2 BOX 2264
STARKE FL 32091**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SENIOR WARDEN (D) ☐ Change ☒ Addition
Richard Edmond Cates
P O BOX 263 N/A
LAWTEY FL 32058**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**JUNIOR WARDEN (D) ☐ Change ☒ Addition
Otto Frederick Siemer III
801-N THOMPSON ST
STARKE FL 32091**

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

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

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

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:

Robert W. Rehberg

2-6-03 904-964-4201

CR2E037 (10/02)