

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90314 022 ****61.25

DOCUMENT # C10145

1. Entity Name
**HERMAN LODGE NO. 108 FREE AND ACCEPTED
MASONS OF FLORIDA**



Principal Place of Business
**C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US**

Mailing Address
**ROY CONNOR SHEPPARD
220 OCEAN STREET
JACKSONVILLE, FL 32202**

60025055



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02022006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-1843502

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHEPPARD, ROY CONNOR
220 OCEAN ST
JACKSONVILLE, FL 32202**

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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
**SW
LAWSON, CHARLES V
18795 HWY 331 S
FREEPORT, FL 324394701** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
SIMMONS, MICHAEL E
399 PINEY POINT RD
FREEPORT, FL 324392864** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SW
COPELAND, DANIEL W
17290 S HWY 331
FREEPORT, FL 324394201** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BRANNON, RONNIE L SR
P.O. BOX 504 N/A
FREEPORT, FL 324390504** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**JW
WALL, GILBERT J
413 POPE ST
FREEPORT, FL 32439** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
**Charles Vernon Lawson
18795 Highway 331 S
Freeport FL 32439-4701**

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

SENIOR WARDEN (D) ☒ Change ☐ Addition
**Gilbert Jon Wall
413 Pope St
Freeport FL 32439-3149**

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

JUNIOR WARDEN (D) ☒ Change ☐ Addition
**David Michael Kelly
1052 Whitfield Dr
Freeport FL 32437-2437**

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

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.

SIGNATURE:

Michael Simmons

Michael Simmons

3-21-06

678-6407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #