FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # C10152 (2)

ASHMORE LODGE NO. 102 FREE AND ACCEPTED MASONS O F FLORIDA

					(IMI AIMIT BEDER DIDIE AIDIE MEDIE BRAIL BEALL FADI
Principal Place of	of Business	Mailing Address			
C/O WILLIAM	G WOLF	C/O WILLIAM O WOLF	_		
220 OCEAN ST JACKSONVILLE FL 32202		220 OCEAN ST JACKSONVILLE FL 32202			
				3. Date Incorporated or Qualified 06/30/1992	3a. Date of Last Report 03/24/1995
2. Principal Pla	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2a. Mailing Address 26 Roy Connor	Sheppara	4. FEI Number 23-7184986	Applied For Not Applicable
21 (O) Suite, Apt. #	<u> </u>	Suite, Apt. #, etc.	The factor of th	5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29	30	Florida Statutes	Yes No
241	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
	ARD, ROY CONNOR		82 Street A	Address (P.O. Box Number is Not Acceptable	e)
220 OCEAN ST JACKSONVILLE FL 32202			83		
JACKSC	INVILLE FL 32202				85 Zip Code
			84 City		-
SIGNATURE _	Signature of ed or printed name of registered ag-	14 V	E Registizad Agent signature re	rporation submits this statement for the pur board of directors. I hereby accept the appx ADDITIONS CHANGE 9 TO OFF	DATE
12.		MD DIRECTORS	1.1 TITLE	WORSHIPFUL MASTER	
TITLE	ADD HADLAN E	The second	1.2 NAME		• • •
NAME	ARD, HARLAN E 241 DIXIE DR.		13 STREET ADDRESS	WILLIAM BOYD STEP	HENS
STREET ADDRESS	TALLAHASSEE FL 32304-3	n 20	1.4 CiTY-ST-ZiP	BOX 266 /V/	7
CITY-ST-ZIP		DELETE TO THE TENT OF THE TENT	2 1 TITLE	SOPCHOPPY FL 3235	8-0266
TITLE	SWD Stephens, William B	[2]	2.2 NAME	SENIOR WARDEN	(D)
NAME	BOX 266 N/A		2.3 STREET ADDRESS	JAMES ALFRED RODE	ENBERRY
STREET ADDRESS	SOPCHOPPY FL 32358-0266		2 4 CITY · ST - ZIP	P. O. BOX 184 N/A	
CITY-ST-ZIP TITLE	JWD	PROELETE	3.1 TITLE	SOPCHOPPY FL 3235	8-0184
1	MATTHEWS, JOHN K	-	3.2 NAME		403
NAME exercit appears	BOX 315 N/A		3.3 STREET ADDRESS	JUNIOR WARDEN	(0)
STREET ADDRESS	SOPCHOPPY FL 32358		34 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	TD	DELETE	4.1 TIILE		
NAME	YATES, GEORGE M	_	4. 2 NAME		
STREET ADDRESS	1221 N. BOULEVARD ST.		4.3 STREET ADDRES	TREASURER	(0)
CITY-ST-ZIP	TALLAHASSEE FL 32303		4.4 CITY - ST - ZIP	DELOUS RICHARD SP	ARKMAN
TITLE	SD	™ DELETE	5 1 TITLE	327 LONNIE RAKER	LANE
NAME	LUNDRIGAN, NATHANIEL	G	5.2 NAME	CRAWFORDVILLE FL	32327-2706
STREET ADDRESS	609 TERRACE ST.		5.3 STREET ADDRES	CKWAL OUDAITEC . C	
CITY-ST-ZiP	TALLAHASSEE FL 32308-4	4944	5 4 CITY - ST - ZIP	SECRETARY	(0)
TITLE	(1) 11 11 14 44 1 1 1 1 1 1 1 1 1 1 1 1 1	DELETE	6 1 TITLE	HARLAN FLBRIDGE	- '
NAME			6.2 NAME	241 DIXIE DR.	
MANGE			A STREET ADDRESS		10704 7000

CTY-SI-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality.

15. I do hereby 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 enipowered 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 attachyent with an address.

SIGNING OFFICER OR DIRECTOR

1 (BARAK NOK 1981) BARAK NOK ALUK ALUK 1981 BARA 1981 BARAK 1981 BARAK 1981 BARAK 1981 BARAK 1981 BARAK 1981 B