

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90080 001 *3,123.75

DOCUMENT # C10163

1. Entity Name

EZRA LODGE NO. 67 FREE AND ACCEPTED MASONS OF FL

Principal Place of Business

Mailing Address

C/O ROY CONNOR SHEPPARD
 220 OCEAN ST.
 JACKSONVILLE FL 32202
 US

C/O ROY CONNOR SHEPPARD
 220 OCEAN ST.
 JACKSONVILLE FL 32202
 US

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

59-0950560

Applied For

Not Applicable

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
WMD
THOMPSON, WILLIAM G
6310 MAGELLEN ROAD
JACKSONVILLE FL 32222

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
JWD
MCKEE, LARRY L
2541 HEATHERLY OAKS COURT
JACKSONVILLE FL 32226

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SWD
MAYBERRY, EUGENE R
7351 OAKWOOD STREET
JACKSONVILLE FL 32208

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TD
SINCLAIR, CURTIS W
7130 NELMS STREET
JACKSONVILLE FL 32208-4945

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TD
CREWS, OWEN G
12278 DUNN CREEK RD
JACKSONVILLE FL 32218-2014

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
WORSHIPFUL MASTER (D)
Eugene Randall Mayberry
7351 OAKWOOD ST
JACKSONVILLE FL 32208

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SENIOR WARDEN (D)
William Elbert Crews Jr
1076 Eagle Bend Ct.
Jacksonville Fl 32226-9501

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
JUNIOR WARDEN (D)
George Henry Arnau
10020 Leisure Ln N
Jacksonville Fl 32256-7105

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TREASURER (D)
James Aaron Jones
14000 INLET DR
JACKSONVILLE FL 32225-2006

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SECRETARY (D)
James William Mixon Sr
2345 Broward Rd
Jacksonville Fl 32218-5147

☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 617.01(3)(b), 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: *James W. Mixon, Sr.*
RECEIVED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-23-01 757-2981

CR2E037 (10/00)