2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

03-16-2007 90040 004 **** 61.25 FILED C10163

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1. Entity Name EZRÁ LODGE NO. 67 FREE AND ACCEPTED MASONS OF FLORIDA



OF FLOR	IDA	,02, 125			SECRETARLE	TI OBIDA	\
Principal Place of Business C/O ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US		Mailing Address C/O ROY CONNOR SHEP 220 OCEAN ST. JACKSONVILLE, FL 3220		1	SECRETARIA LLAHASSEE, 17747	<u></u>	
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	. · · · · · · · · · · · · · · · · · · ·	01182007 CI	ng-NP CR2E	E037 (12/ 06)	
City & State	0	City & State		4. FEI Number 59-095056	60	⊢ + -	oplied For
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	\$8.75 Add Fee Require	ditional d
· · · · · ·	6. Name and Address of Current I	Registered Agent		7. Name and Add	iress of New Registers	d Agent	
			Name				
220 OCEA			Street Add	dress (P.O. Box Number is	Not Acceptable)		
JACKSON	WILLE, FL 32202						
			City		F	L Zip Cod	ю
the obligat	named entity submits this statement for tions of registered agent.	r the purpose of changing its r	registered office or re	egistered agent, or both, in	the State of Florida. I a	un familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent of	and title if applicable. (NOTE:	: Registered Agent signature	required when reinstating)	OAT	E	
SIGNATURE	Filing Fee is \$61.25	9. Election Cam	npalgn Financing	\$5.00 May Be	Make ch	eck payable t	
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund Co	npalgn Financing ontribution.	\$5.00 May Be Added to Fees	Make ch Florida Dej	eck payable t partment of S	tate
10.	Filling Foe is \$61.25 Due by May 1, 2007 OFFICERS AND DIF	9. Election Cam Trust Fund Co	npalgn Financing contribution.	\$5.00 May Be Added to Fees	Make ch	eck payable t partment of S DIRECTORS IN	tate
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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 suppliemental 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 amounted 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 attactyright with an address with all other like empowered.

904.641.3463 George H. Hryau. 03.12.07