

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90201 020 \*\*\*\*61.25

**DOCUMENT # C10179**

1. Entity Name  
**PINELLAS DAYLIGHT LODGE NO. 385 FREE AND  
ACCEPTED MASONS OF FLORIDA**



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

Mailing Address  
**C/O ROY CONNOR SHEPPARD  
220 OCEAN STREET  
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

03202004

Chg-NP

CR2E037 (10/03)

4. FEI Number  
**59-2412113**

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 C  
220 OCEAN STREET  
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, 2004

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**WMD  
DOUGHERTY, LOWELL K  
6485 76TH TERR.  
PINELLAS PARK, FL 33781** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**WORSHIPFUL MASTER (D) ☐ Change ☒ Addition  
Claud Charles Cheshire  
1401 77th Ave N  
Saint Petersburg FL 33702-5127**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
MILLIS, ALTON EARL  
2419 GULF TO BAY BLVD, LOT 1321  
CLEARWATER, FL 33765** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SENIOR WARDEN (D) ☒ Addition  
Nicholas Stephen Outts  
737 PINELLAS BAY WAY #205  
TIERRA VERDE FL 33715**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
KIRKPATRICK, ROBERT G  
1846 PENN WOOD CIR  
CLEARWATER, FL 34616** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**JUNIOR WARDEN (D) ☒ Addition  
Andrew Fordyce Kendle Jr  
10315 CARROLLWOOD LANE  
TAMPA FL 33618-4700**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**JWD  
HAYES, HAROLD R  
225 COUNTRY CLUB DR.  
LARGO, FL 33771** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SECRETARY (D) ☒ Change ☐ Addition  
Lowell Kelly Dougherty Sr  
6485 76th Terr.  
Pinellas Park FL 33781-3130**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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:

**LOWELL K. DOUGHERTY**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**10 APRIL 2004 727-546-8604**  
Date Daytime Phone #

SECRETARY