


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90246 006 \*\*\*\*61.25

<b>DOCUMENT # C10183</b> 1. Entity Name <b>PORT TAMPA LODGE NO. 153 FREE AND ACCEPTED MASONS OF FLORIDA</b>					
Principal Place of Business <b>ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US</b>			Mailing Address <b>ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US</b>		
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 <b>23-7136823</b>	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>SHEPPARD, ROY C 220 OCEAN STREET JACKSONVILLE, FL 32202</b>			Name Street Address (P.O. Box Number is Not Acceptable) City		
			State <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	SWD	<input checked="" type="checkbox"/> Delete	TITLE	Senior Warden (D) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DEAN, JIMMIE D		NAME	Brigham, David B.	
STREET ADDRESS	4213 OHIO AVE.		STREET ADDRESS	4415 Lackland Place	
CITY-ST-ZIP	TAMPA, FL 336161203		CITY-ST-ZIP	Tampa, FL 33616	
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BISHOP, JAMES E		NAME		
STREET ADDRESS	7002 SPARKMAN ST.		STREET ADDRESS		
CITY-ST-ZIP	TAMPA, FL 336161839		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KIDD, GERALD D		NAME		
STREET ADDRESS	4412 W PAUL AVENUE		STREET ADDRESS		
CITY-ST-ZIP	TAMPA, FL 336113322		CITY-ST-ZIP		
TITLE	VMD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROWE, JR, RAYMOND S		NAME		
STREET ADDRESS	2805 S. MILLER RD.		STREET ADDRESS		
CITY-ST-ZIP	VALRICO, FL 33594		CITY-ST-ZIP		
TITLE	JWD	<input checked="" type="checkbox"/> Delete	TITLE	Junior Warden (D) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRIGHAM, DAVID BEN		NAME	Dean, Jimmy D.	
STREET ADDRESS	4415 W. LACKLAND PL		STREET ADDRESS	4213 Ohio Avenue	
CITY-ST-ZIP	TAMPA, FL 33616		CITY-ST-ZIP	Tampa, FL 33616	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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.					
<b>SIGNATURE:</b> <i>James E. Bishop, SEC</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>4/24/06</b> (813) 837-0688 <small>Daytime Phone #</small>		