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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT #

C10185

BYKOTA LODGE NO. 333 FREE AND ACCEPTED MASONS OF FLORIDA

Principal Place of Business Mailing Address C/O ROY CONNOR SHEPPARD C/O ROY CONNOR SHEPPARD 3. Date Incorporated or Qualified 220 OCEAN ST. 220 OCEAN ST. 06/30/1992 JACKSONVILLE FL 32202 JACKSONVILLE FL 32202 4. FEI Number Applied For 23-7526549 Not Applicable 2. Principal Place of Business 2a. Malling Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 27 Trust Fund Contribution 22 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SHEPPARD, ROY CONNOR 82 Street Address (P.O. Box Number is Not Acceptable) 220 OCEAN STREET JACKSONVILLE FL 32202 83 City Zip Code 85

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am to other with, and accept the appointment as registered agent. I am to other with, and accept the appointment as registered.

SIGNATURE (NOTE: Registered Agent signature required when remetating) 12. OFFICERS AND DIRECTORS 13. ☐ DELETE Addition TITLE 1.1 TITLE (D) X WORSHIPFUL MASTER NAME HANDY, EDWARD GENE 1.2 NAME Leonard Thomas Volpe 928 DOGWOOD RD STREET ADDRESS 1.3 STREET ADDRESS 9353 Pinion Dr WEST PALM BEACH FL 33409-4876 CITY-ST-ZIP 1.4 CITY-ST-ZIP Lake Worth F1 33467-1031 DELETE Addition TITI F 21 TITLE (D) × **VOLPE, LEONARD THOMAS** SECRETARY NAME 2.2 NAME Billy Mason Taylor 9353 PINION DR STREET ADDRESS 2.3 STREET ADDRESS LAKE WORTH FL 33467-1031 5343 Sandhurst Cir N CITY-ST-ZIF 2. 4 CITY - ST-ZIP Lake Worth F1 33463-5809 hange JWD DELETE TITLE 3.1 TITLE SINOT, WAYNE J NAME 3.2 NAME SENIOR WARDEN (D) X 1849 ABBEY RD STREET ADDRESS 3.3 STREET ADDRESS Wayne J Sinot WEST PALM BEACH FL 33415 3.4. CITY-ST-ZIP CITY-ST-ZIP 1849 Abbey Rd Addition DELETE 4.1 TITLE TITLE West Palm Beach FL 33415 ADAMS, RICHARD LURAL NAME 4. 2 NAME 6332 SUMMER SKY LN 4.3 STREET ADORESS JUNIOR WARDEN STREET ADDRESS LAKE WORTH FL 33463-3815 Wayne A Miller 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ►< nange Addition 5.1 TITLE 3695 Dorrit Ave TITLE TAYLOR, BILLY MASON 5.2 NAME Boynton Beach FL 33436 NAME 5343 SANDHURST CIR N 5.3 STREET ADDRESS STREET ADDRESS TREASURER LAKE WORTH FL 33463-5809 5.4 CITY-ST-ZIP CITY-ST-ZIP Richard Lural Adams DELETE Addition TITLE 6.1 TITLE 624 Sea Pine Way Apt E2 NAME 6.2 NAME West Palm Beach FL 33415-8937 STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Thereby 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 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 empowered 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 attachment with an address

SIGNATURE:

CITY-ST-ZIP

= 21008 (SC1)964-8163

FILED

Mar 31 1998 8:00am

Secretary of State