

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # C10203

1. Entity Name

INGLIS LODGE NO. 324 FREE AND ACCEPTED MASONS OF

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90138 001 *8,207.50

Principal Place of Business
ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE FL 32202

Mailing Address
ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE FL 32202-3218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7526542

Applied For

Not Applicable

Zip

Country

Zip

Country

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 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.

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.

DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

JWD
BRENNAN, THOMAS J
PO BOX 709 N/A
INGLIS FL 34449

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

JUNIOR WARDEN (D)
James Harvey Head
5924 W Pine Circle
Crystal River FL 34429

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
BARNES, BOBBY J
P.O. BOX 398 N/A
INGLIS FL 34449-0398

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

WMD
FURSE, WILLIAM J JR
PO BOX 52 N/A
INGLIS FL 34449-0052

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

WORSHIPFUL MASTER (D)
Frank Wohlfahrt
1565 S. Dell Pt.
Homosassa FL 34448-1422

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SWD
WOHLFAHRT, FRANK
1565 S. DELL PT
HOMOSASSA FL 34448-1422

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SENIOR WARDEN (D)
Thomas James Brennan
P O Box 709 N/A
Inglis FL 34449

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
IVES, RICHARD K
48 DIXON AVE
INGLIS FL 34449-9731

☐ 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.

Bobby J. Barnes, Sec.

904-354-2339

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)