2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

Apr 18, 2001 8:00 am § Secretary of State DOCUMENT # C10203 1. Entity Name 04-18-2001 90080 001 *3,123.75 INGLIS LODGE NO. 324 FREE AND ACCEPTED MASONS OF Principal Place of Business Mailing Address ROY CONNOR SHEPPARD ROY CONNOR SHEPPARD 37897 220 OCEAN ST. 220 OCEAN ST. JACKSONVILLE FL 32202 JACKSONVILLE FL 32202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 23-7526542 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) SHEPPARD, ROY CONNOR 220 OCEAN STREET JACKSONVILLE FL 32202 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. JWD 🔀 Delete ☐ Addition CR2E037 (10/00) TITLE TITLE Change WORSHIPFUL MASTER NAME HEAD, JAMES H Thomas James Brennan STREET ADDRESS STREET ADDRESS 5924 WEST PINE CIRCLE O Box 709 N/A CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL 34429 Inglis-FL 34449 **⊠**Delete ☐ Change ☐ Addition TITLE NAME BARNES, BOBBY J NAME (D)SENIOR WARDEN STREET ADDRESS STREET ADDRESS P.O. BOX 398 N/A-James Harvey Head CITY-ST-ZIP CITY-ST-ZIP INGLIS FL 34449-0398 5924 W Pine Circle TITLE TITLE Change Addition Orystal River FL 34429 NAME WOHLFAHRT, FRANK NAME STREET ADDRESS STREET ADORESS 1565 SOUTH DELL POINT JUNIOR WARDEN (D) CITY-ST-ZIP CITY-ST-ZIP HOMOSASSA FL 34448-1422 Alan Hogg -TITLE Delete TITLE ☐ Change ☐ Addition P O BOX 10 NAME NAME BRENNAN, THOMAS J YANKEETOWN FL 34478 STREET ADDRESS STREET ADDRESS P.O. BOX 709 CITY-ST-ZIP CITY-ST-ZIP INGLIS FL 34449 TREASURER (D)TITLE Delete William Jacob Furse Jr ☐ Addition NAME IVES, RICHARD K P 0 Box 52 NA STREET ADDRESS STREET ADDRESS 48 DIXON AVE Ingliz F1 34449-0052 CITY-ST-ZIP CITY-ST-ZIP INGLIS FL 34449-9731 SECRETARY TITLE ☐ Delete TITLE ☐ Addition NAME |Rodney Eric Phelps NAME STREET ADDRESS STREET ADDRESS 408 Morse St CITY-ST-ZIP CITY-ST-ZIP Inverness Fl 34452 12. I hereby certify that the information supplied with this filling does not qualify for the exemption sta. 9.7 er certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legar effect as it made under ours; 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 fillorida Statutes; and that my name appears in Block 10 or Block 11 if changed or on an attractment with an address, with all left by the empowered.

Time