

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90169 037 ****61.25

DOCUMENT # C10203

1. Entity Name
**INGLIS LODGE NO. 324 FREE AND ACCEPTED MASONS
OF FLORIDA**



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

Mailing Address
**ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE, FL 32202**

40049564



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02092007 Chg-NP CR2E037 (12/06)

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. 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, 2007**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**WMD
PAGUET, ROBERT J
POB 2563
CRYSTAL RIVER, FL 344232563** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SWD
LEBARRON, JACK P
400 VICKI ST
INGLIS, FL 344499140** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**JWD
MOORE, LLOYD L JR
POB 1128
INGLIS, FL 344491158** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
FURSE, WILLIAM J
PO BOX 52
INGLIS, FL 34449** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HOWELL, DAVID PAUL
19690 SE VICKI ST
INGLIS, FL 344494605** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SENIOR WARDEN (D) ☐ Change ☒ Addition
James Harvey Head
5924 W Pine Cir
Crystal River FL 34429-7579**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
Jack Peter LeBarron
400 Vicki St
Inglis FL 34449-9140**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SENIOR WARDEN (D) ☐ Change ☒ Addition
Barry Ross Allen
P O Box 3051
Dunnellon FL 34430-3051**

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

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

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 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.

SIGNATURE:

David P. Howell

David P. Howell

3/19/07 352-447-4371

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #