

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90278 042 ****61.25

DOCUMENT # C10208 1. Entity Name CITRUS LODGE NO. 118 FREE AND ACCEPTED MASONS OF FLORIDA					
Principal Place of Business C/O ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US			Mailing Address C/O ROY CONNOR SHEPPARD 220 OCEAN ST. JACKSONVILLE, FL 32202 US		
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 59-0194073	
5. Certificate of Status Desired <input type="checkbox"/>				\$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 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D		WORSHIPFUL MASTER (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	MABIE, WALTER E WM		Gary Hubert Blanton		
STREET ADDRESS	3700 E DIAMOND CIR		150 N. Oakwood Terr.		
CITY-ST-ZIP	HERNANDO, FL 344427902		Inverness FL 34453-1011		
TITLE	SWD		SENIOR WARDEN (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	MABIE, WALTER EUGENE		Wayne Charles Sessa		
STREET ADDRESS	3700E DIAMOND CIR.		60 New Florida Ave		
CITY-ST-ZIP	HERNANDO, FL 344427902		Beverly Hills FL 34465-4317		
TITLE	D		JUNIOR WARDEN (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	SCHOFIELD, FREDERICK J JW		Steven Hurst Creamer		
STREET ADDRESS	1334 CYPRESS COVE CT		6232 E Joyce Ln		
CITY-ST-ZIP	INVERNESS, FL 344505073		Inverness FL 34452-7634		
TITLE	T		NAME		
NAME	ORTLOFF, F. WILLIAM		STREET ADDRESS		
STREET ADDRESS	617 W CASE STREET		CITY-ST-ZIP		
CITY-ST-ZIP	HERNANDO, FL 34442		SECRETARY (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE	SD		Kevin D Warner		
NAME	RAMSEY, RALPH EUGENE		1420 N Manada Hill Dr		
STREET ADDRESS	935 CARNEGIE DR		Inverness FL 34453-0406		
CITY-ST-ZIP	INVERNESS, FL 344506821		TREASURER (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE	D		Edward Ralph Gingrich		
NAME	HUFF, BILLY SW		4130 INDIANHEAD RD		
STREET ADDRESS	1033 E CLOVERNOOK LN		HERNANDO FL 34442		
CITY-ST-ZIP	INVERNESS, FL 344502779				
12. I hereby certify that the information supplied with this filing does not qualify for the exemption 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: <i>Kevin D. Warner</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 3-6-06 Daytime Phone # 352-344-4544		