2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 3

IGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER O

Apr 04, 2007 8:00 am Secretary of State DOCUMENT # C10214 04-04-2007 90169 035 ****61 25 HARBOR CITY LODGE NO. 318 FREE AND ACCEPTED MASONS OF FLORIDA Principal Place of Business Mailing Address 40049566 ROY CONNOR SHEPPARD ROY CONNOR SHEPPARD 220 OCEAN ST. 220 OCEAN ST. JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02092007 Chg-NP CR2E037 (12/06) 4. FEI Number 23-7148491 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHEPPARD, ROY CONNOR 220 OCEAN STREET Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32202 City Zio Code FL 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 Filling Fee is \$61.25 Make check payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (D) WMD TITLE TITLE 🔀 Delete Change **X** Addition James William Demenkow GODDARD, GEORGE E JR NAME NAME STREET ADDRESS 2442 APPALACHIAN DR 387 Southhampton Or STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 329353389 CITY-ST-ZIP Indialantic_FL 32903-4046 SWD WORSHIPFUL MASTER Delete (D) X Change TITLE □ Addition LIBBY, ERNEST G NAME NAME Ernest Garfield Libby STREET ADDRESS 1642 W SHORES RD STREET ADDRESS 1642 W Shores Rd CITY-ST-ZIP MELBOURNE, FL 329354463 CITY-ST-ZIP Melbourne FL 32935-4463 FENJSS WARDEN TITLE 🔀 Delete TITLE ☐ Addition HUTZLER, MICHAEL R NAME NAME Michael Raymond Hutzler STREET ADDRESS 5305 EVINRUDE RD STREET ADDRESS 5305 Evinrude Rd CITY-ST-7IP MELBOURNE, FL 329349121 CITY-ST-ZIP Melbourne FL 32934-9121 TITLE Delete [] Change TITLE Addition V HALL, ERIC DEAN NAME NAME STREET ADDRESS 2342 LEEWOOD BLVD. STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32935 CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition PANICCLA, JOHN NAME ν NAME PO BOX 33034 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP INDIALANTIC, FL 329030034 CITY-ST-ZIP Delete TITLE TITLE □ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 <u>fune and accurate and</u> 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 treating employered to execute this peoper 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 addressy with all other like employered.

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