2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10225

FILED Jan 25, 2009 Secretary of State

Entity Name: HIRAM LODGE NO. 5 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business: New Principal Place of Business:

C/O ROY CONNER SHEPPARD RICHARD E. LYNN 220 OCEAN ST. 220 OCEAN ST.

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

C/O ROY CONNER SHEPPARD RICHARD E. LYNN 220 OCEAN ST. 220 OCEAN ST.

JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202

FEI Number: 59-2793813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EDWARD, LYNN R

220 OCEAN STREET

LYNN, RICHARD E

220 OCEAN STREET

JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 US

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: RICHARD E. LYNN 01/25/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: SW (X) Change () Addition

 Name:
 WILLIS, MICHAEL T
 Name:
 BILLBERRY, JAMES R

 Address:
 186 WILLIS RD
 Address:
 739 SILVER LAKE ROAD

 City-St-Zip:
 MONTICELLO, FL 323445600
 City-St-Zip:
 MONTICELLO, FL 32344

Title: WMD () Delete Title: () Change () Addition

Name: MONTPELLIER, ROBERT F Name:
Address: 57 CARDINAL CT Address:

 Address:
 57 CARDINAL CT.
 Address:

 City-St-Zip:
 CRAWFORDVILLE, FL 323276210
 City-St-Zip:

Title: JWD () Delete Title: () Change () Addition

 Name:
 MICHALSKI, JÖHN H
 Name:

 Address:
 8649 OAK FOREST TRL
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 323125038
 City-St-Zip:

Title: () Delete Title: (X) Change () Addition GEBHARD, JOHN CHARLES Name: Name: GEBHARD, JOHN CHARLES 25228 W. WASHINGTON ST. 2522 W. WASHINGTON ST. Address: Address: City-St-Zip: MONTICELLO, FL 32344 City-St-Zip: MONTICELLO, FL 32344

 Name:
 FAGLIE, ROY H
 Name:
 FAGLIE, ROY H

 Address:
 545 WEST LAKE RD
 Address:
 235 NORTH OLIVE

 City-St-Zip:
 MONTICELLO, FL 323445651
 City-St-Zip:
 MONTICELLO, FL 32344

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD E. LYNN GS 01/25/2009