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Apr 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **C10276** (9)

1. Corporation Name

**ELMER O. SMITH LODGE NO. 307 FREE AND ACCEPTED M
ASONS OF FLORIDA**

Principal Place of Business

Mailing Address

**ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE FL 32202
US**

**ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE FL 32202
US**

3. Date Incorporated or Qualified

06/30/1992

4. FEI Number

23-7184984

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE FL 32202**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE



Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-13-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **ROBINSON, DANNY HAYES**
STREET ADDRESS **7505 US 19 N #7**
CITY-ST-ZIP **PINELLAS PARK FL**

TITLE **D** ☐ DELETE
NAME **GARRETT JR, WILLIAM BATES**
STREET ADDRESS **2293 AUSTRIAN LANE #33**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **D** ☐ DELETE
NAME **MARLOWE, HERBERT W**
STREET ADDRESS **4081 68TH AVE N**
CITY-ST-ZIP **PINELLAS PARK FL**

TITLE **D** ☐ DELETE
NAME **NELSON, JOSEPH EDWARD**
STREET ADDRESS **10345 65TH AVE N**
CITY-ST-ZIP **SEMINOLE FL**

TITLE **D** ☐ DELETE
NAME **GARRETT, WILLIAM BATES**
STREET ADDRESS **2293 AUSTRIAN LANE #33**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **SD** ☐ DELETE
NAME **VARNEY, CLAUDE CLAYTON**
STREET ADDRESS **759 90TH AVE N**
CITY-ST-ZIP **ST PETERSBURG FL**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

WORKSHIPFUL MASTER (D) X Change ☐ Addition
William Bates Garrett Jr
2293 Austrian Lane #33
Clearwater FL 33763

SECRETARY (D) X Change ☐ Addition
William Bates Garrett
2293 Austrian Lane #33
Clearwater FL 33763

SENIOR WARDEN (D) X Change ☐ Addition
Fern Edward Street
5324 73rd St N
St Petersburg FL 33709

JUNIOR WARDEN (D) X Change ☐ Addition
Herbert W Marlowe
4081 66th Ave N
Pinellas Park FL 33781-6102

TREASURER (D) X Change ☐ Addition
Danny Hayes Robinson
7505 U.S. 19 N # 7
Pinellas Park FL 34665

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



MARCH 9, 1998

813-726-3180

CR2E037 (10/97)