

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90303 001 *1,225.00

DOCUMENT # C10283

1. Corporation Name

SUNSHINE LODGE NO. 288 FREE AND ACCEPTED MASONS
OF FLORIDA

Principal Place of Business

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202
US

Mailing Address

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE FL 32202
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

06/30/1992

4. FEI Number

59-0755251

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

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

N/A

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

N/A

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
WMD FROST, DORAN R 2346 40TH AVENUE N. ST. PETERSBURG FL 33714 ☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP
SD RONEY, DONALD G 1708 55TH STREET S. GULFPORT FL 33707-4248 ☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP
SWD HARDMAN, JOHN A JR 8630 52ND LN PINELLAS PARK FL 33782 ☒ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP
JWD SIMETA, EDWARD K 1881 63RD TERRACE S. ST. PETERSBURG FL 33712-5946 ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP
TD GUENTHNER, CHARLES J 6594 N. GOLD LEAF POINT DUNNELLON FL 34433 ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
John Albert Hardman Jr
8630 52nd Ln
Pinellas Park FL 33782

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
SENIOR WARDEN (D) ☒ Change ☐ Addition
Paul Stephen March
6209 2nd Ave N
St Petersburg FL 33710

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
SECRETARY (D) ☒ Change ☐ Addition
Michael Wayne Hardman
4002 KIMPTON PLACE
LARGO FL 33771

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

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

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

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, with all other like empowered.

SIGNATURE: *Michael Wayne Hardman Jr* 03/30/99 727 464-6448
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)