

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90308 035 ****61.25

DOCUMENT # C10285



1. Entity Name
**GRACEVILLE LODGE NO. 284 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

94049616



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03202004

Chg-NP

CR2E037 (10/03)

4. FEI Number
23-7526510

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$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 ST
JACKSONVILLE, FL 32202

Name

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

City

FL

Zip Code

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

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WMD
CLIFTON BELL, CHARLIE
1130 SELMA CHURCH RD
GRACEVILLE, FL 32440 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SWD
SKIPPER, RANDY L
P.O. BOX 220
NOMA, FL 324520074 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JWD
MERRITT, PAUL A
1324 JUNCTION RD
SLOCOMB, AL 36375 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
SKIPPER, GEORGE T
PO BOX 52
NOMA, FL 324520052 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JUNIOR WARDEN (D) ☐ Change ☒ Addition
JULIUS DALE MCSWAIN
947 11th Ave.
Greenville FL 32440

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY (D) ☐ Change ☒ Addition
Robert Lawson Skipper
P O Box 74 N/A
Noma FL 32452-0074 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 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:

Robert L Skipper **Robert L Skipper**

4-3-04
Date

850-263-3303
Daytime Phone #