
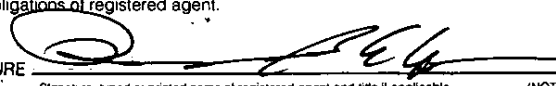
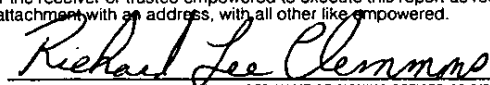


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2008 8:00 am**  
**Secretary of State**

03-21-2008 90016 042 \*\*\*\*61.25

<b>DOCUMENT # C10290</b> 1. Entity Name <b>SUGARLAND LODGE NO. 281 FREE AND ACCEPTED MASONS OF FLORIDA</b>					
Principal Place of Business <b>ROY CONNOR SHEPPARD</b> <b>220 OCEAN ST</b> <b>JACKSONVILLE, FL 32202 US</b>			Mailing Address <b>ROY CONNOR SHEPPARD</b> <b>220 OCEAN ST</b> <b>JACKSONVILLE, FL 32202 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.  City & State  Zip Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip Country		4. FEI Number <b>23-7526507</b> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				02072008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent  <b>SHEPPARD, ROY CONNOR</b> <b>220 OCEAN ST</b> <b>JACKSONVILLE, FL 32202</b>			7. Name and Address of New Registered Agent  <b>Lynn, Richard Edward</b> <b>220 Ocean Street</b> <b>Jacksonville, Florida 32202</b> 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  DATE <b>3/18/08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b> Make check payable to <b>Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMART, CECIL C 297 W MAIN ST. PAHOKEE, FL 334762114	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JUNIOR WARDEN John D Caty 705 E Avenida De Rio CLEWISTON, FL 33440	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CLEMMONS, RICHARD L 135 OAK DR CLEWISTON, FL 33440	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	( )	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VEALE, DAVID J PO BOX 861 CLEWISTON, FL 334400861	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	( )	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEEN, MELVIN C P.O. BOX 1241 CLEWISTON, FL 334401241	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	( )	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REYES, TEODORO H 224 DESOTO AVE CLEWISTON, FL 334402407	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	( )	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	( )	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	( )	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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, changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <b>March 13, 2008</b> Daytime Phone # <b>239-633-0768</b>		

Richard Lee Clemmons