

2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90378 009 ****61.25

DOCUMENT # C10293

1. Entity Name
OCEANWAY LODGE NO. 279 FREE AND ACCEPTED
MASONS OF FLORIDA



Principal Place of Business
ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202

Mailing Address
ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202

40061540



2. Principal Place of Business

3. Mailing Address

03182005 Chg-NP CR2E037 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-1641891

Applied For
Not Applicable

Zip

Country

Zip

Country

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, 2005

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 WMD ☒ Delete
NAME DEWEY HENRY, GEORGE
STREET ADDRESS 10828 PEACEFUL HARBOR DR.
CITY-ST-ZIP JACKSONVILLE, FL 322184977

TITLE SWD ☒ Delete
NAME NELSON HARE, DAN
STREET ADDRESS 12870 YELLOW BLUFF RD.
CITY-ST-ZIP JACKSONVILLE, FL 322264800

TITLE JWD ☒ Delete
NAME MILLARD BARR, CHARLES
STREET ADDRESS 819-1 FIELDS RD.
CITY-ST-ZIP JACKSONVILLE, FL 322183842

TITLE TD ☒ Delete
NAME MORRIS, PHILLIP W
STREET ADDRESS 15426 SHANE PARKS LANE
CITY-ST-ZIP JACKSONVILLE, FL 322181462

TITLE TD ☐ Delete
NAME WISE, WILLIAM L SR.
STREET ADDRESS 2550 WATER BLUFF DR
CITY-ST-ZIP JACKSONVILLE, FL 32218

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE WORSHIPFUL MASTER (D) ☒ Change ☐ Addition
NAME Dan Nelson Hare
STREET ADDRESS 12870 Yellow Bluff Rd
CITY-ST-ZIP Jacksonville FL 32226-4800

TITLE SENIOR WARDEN (D) ☒ ☐ Addition
NAME Charles Millard Barr
STREET ADDRESS 819-1 Fields Rd
CITY-ST-ZIP Jacksonville FL 32218-3842

TITLE JUNIOR WARDEN (D) ☒ ☐ Addition
NAME Bryan Lindsey Smith
STREET ADDRESS 2106 Dunn Creek Cemetery Rd
CITY-ST-ZIP Jacksonville FL 32218-2018

TITLE SECRETARY (D) ☒ ☐ Addition
NAME Phillip Wayne Morris
STREET ADDRESS 15426 Shane Parks Ln
CITY-ST-ZIP Jacksonville FL 32218-1462

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Philip W. MORRIS

4/5/05

Date

904-751-6627

Daytime Phone #