2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State
04-18-2007 90147 034 ****61.25

DOCUMENT # C10297

1. Entity Name
MANDARIN LODGE NO. 343 FREE AND ACCEPTED MASONS 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

02092007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7526558 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

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, 2007

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	WMD RANDALL, DAVID MYRON L 664 E TROPICAL TRACE JACKSONVILLE, FL 322591933	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~JUNIOR WARDEN~~ (D) George Stanley Blum 1725 Lochamy Ln Jacksonville FL 32259-5478	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SWD AVERA, WILLIAM E III 9032 CUMBERLAND FOREST WY JACKSONVILLE, FL 322571722	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SENIOR WARDEN~~ (D) William Edgar Avera III 9032 Cumberland Forest Wy Jacksonville FL 32257-1722	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JWD EATON, DAX L 11372 CHAPELGATE LN JACKSONVILLE, FL 322238761	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~SENIOR WARDEN~~ (D) Dax Leslie Eaton 11372 Chapelgate Ln Jacksonville FL 32223-8761	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WARREN, JASON T 621 POKEBERRY PL JACKSONVILLE, FL 322595438	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY (D) Charles David Higgins 12390 Flynn Rd Jacksonville FL 32223-2612	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SHOFFER, JACK V 1777 BOLTON ABBEY DR JACKSONVILLE, FL 32223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER (D) John Mark Swan 1757 Leyburn Ct Jacksonville FL 32223-5006	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Charles D. Higgins Charles D. Higgins 3/15/07 292-0946
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #