2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 12, 2004 8:00 am Secretary of State DOCUMENT # C10308 04-12-2004 90274 026 ****61.25 BAY LODGE NO. 337 FREE AND ACCEPTED MASONS OF FLORIDA Principal Place of Business Mailing Address ጟጟቔዀቔቔቔቝ C/O ROY CONNOR SHEPPARD C/O ROY CONNOR SHEPPARD 220 OCEAN ST 220 OCEAN ST JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 03202004 Chg-NP CR2E037 (10/03) City & State 4. FEI Number 23-7526548 Applied For City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent: 7. Name and Address of New Registered Agent Name SHEPPARD, ROY CONNOR Street Address (P.O. Box Number is Not Acceptable) 220 OCEAN STREET JACKSONVILLE, FL 32202 City 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 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITI F (D) Change Delete WORSHIPFUL MASTER TITLE Addition BREED, HOWARD J NAME NAME William Perry Wolfe 3117 W. 21ST CT. STREET ADDRESS STREET ADDRESS 5933 SHANNON CIRCLE CITY-ST-7IP PANAMA CITY, FL 32405 CITY-ST-7IP YOUNGSTOWN FL 32466-2643 Delete Addition TITLE SENIOR WARDEN NAME NAME COLLIN, III, PERRY B Perry Benjamin Collins III STREET ADDRESS 3020 KINGSWOOD DR. STREET ADDRESS 3020 KINGSWOOD DR CITY-ST-ZIP PANAMA CITY, FL 32405 CITY-ST-ZIP PANAMA CITY FL 32405-2026 ange-SWD - - -- Maddition -- TITLE TITLE - -WOLFE, WILLIAM P NAME (D) JUNIOR WARDEN NAME STREET ADDRESS 5933 SHANNON CIRCLE STREET ADDRESS Edward Lee Brown CITY-ST-ZIP YOUNGSTOWN, FL 32466 CITY-ST-ZIP Bi22 E Thind St ☐ Delete TITLE Panama City FL 32401-5643 ☐ Addition TITI E BENNETT, ADDISON A NAME NAME (D) SECRETARY STREET ADDRESS STREET ADDRESS 4518 TROPICAL DR John Byford Winfree CITY-ST-ZIP PANAMA CITY, FL 324045201 CITY-ST-ZIP 4435 Pine Treefed Delete TITI F □ Addition TITLE Lynn Haven FL 32444-3435 WINFREE, JOHN B NAME 4435 PINE TREE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LYNN HAVEN, FL 32444 Change ☐ Addition Delete TITLE TITLE ... NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP 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 prefustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if address, with all other like empowered.

> JOHN B. WINTER SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED