

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2005 8:00 am
Secretary of State

05-17-2005 90012 026 ****61.25

DOCUMENT # C10308

1. Entity Name
BAY LODGE NO. 337 FREE AND ACCEPTED MASONS
OF FLORIDA



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

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03232005 Chg-NP CR2E037 (10/03)

4. FEI Number
23-7526548

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 STREET
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE WM ☒ Delete
NAME WOLFE, WILLIAM P
STREET ADDRESS 5933 SHANNON CIRCLE
CITY-ST-ZIP YOUNGSTOWN, FL 324662643

TITLE WORSHIPFUL MASTER (D) ☒ Addition
NAME Perry Benjamin Collins III
STREET ADDRESS 3020 Kingswood Dr
CITY-ST-ZIP Panama City FL 32405-2026

TITLE SW ☒ Delete
NAME COLLINS, PERRY B III
STREET ADDRESS 3020 KINGSWOOD DR.
CITY-ST-ZIP PANAMA CITY, FL 324052026

TITLE SENIOR WARDEN (D) ☒ Addition
NAME Edward Lee Brown
STREET ADDRESS 3122 E 3rd St
CITY-ST-ZIP Panama City FL 32401-5643

TITLE JW ☒ Delete
NAME BROWN, EDWARD L
STREET ADDRESS 3122 E THIRD ST
CITY-ST-ZIP PANAMA CITY, FL 324015643

TITLE JUNIOR WARDEN (D) ☒ Addition
NAME James Carlton Duke
STREET ADDRESS 2336 Washington St
CITY-ST-ZIP Lynn Haven FL 32444-3053

TITLE TD ☐ Delete
NAME BENNETT, ADDISON A
STREET ADDRESS 4518 TROPICAL DR
CITY-ST-ZIP PANAMA CITY, FL 324045201

TITLE SECRETARY (D) ☒ Addition
NAME Steven Todd McGuire
STREET ADDRESS 2934-B Bormarc St
CITY-ST-ZIP Tyndall AFB FL 32403

TITLE S ☒ Delete
NAME WINFREE, JOHN B JR
STREET ADDRESS 4435 PINE TREE ROAD
CITY-ST-ZIP LYNN HAVEN, FL 32444

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Steven T. McGuire Steven T. McGuire

4-30-05 850-286-4712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #