FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR -1 PM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE **130.00

DOCUMENT # C10309 (8)

1. Corporation Name

ALACHUA LODGE NO. 26 FREE AND ACCEPTED MASONS OF FLORIDA

Principal Place of Business	Mailing Address
C/O WILLIAM G WOLF 220 OCEAN ST JACKSONVILLE FL 32202	C/O WILLIAM G WOLF 220 OCEAN ST JACKSONVILLE FL 32202

3. Date Incorporated or Qualified: 01/13/1857
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-6159289 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business — 21 / Suite, Apt. #, etc. — 22 / City & State — 23 / Zip — 24 / Country — 25

2a. Mailing Address — 26 / Suite, Apt. #, etc. — 27 / City & State — 28 / Zip — 29 / Country — 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WOLF, WILLIAM G
220 OCEAN STREET
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name: SHEPPARD, ROY CONNOR
82 Street: 220 OCEAN STREET
83: JACKSONVILLE FL 32202
84 City:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Roy Connor Sheppard — 2/6/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	WM	1.1 TITLE	WORSHIPFUL MASTER/D ☐ Change ☐ Addition
NAME	POLK, WENDEL E	1.2 NAME	WENDEL G. POLK
STREET ADDRESS	RT 1 BOX 124A	1.3 STREET ADDRESS	R+1, Box 124A
CITY-ST-ZIP	ALACHUA FL	1.4 CITY-ST-ZIP	Alachua, FL 32615-9728
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	DUKE, FRED C	2.2 NAME	
STREET ADDRESS	P.O. BOX 177 N/A	2.3 STREET ADDRESS	
CITY-ST-ZIP	ALACHUA FL	2.4 CITY-ST-ZIP	
TITLE	SW	3.1 TITLE	SENIOR WARDEN/D
NAME	CARTER, GENE E	3.2 NAME	JOE BREEDEN
STREET ADDRESS	P.O. BOX 279	3.3 STREET ADDRE	3403 N.W. 158TH AVE.
CITY-ST-ZIP	ALACHUA FL 32615-0279	3.4 CITY-ST-ZIP	GAINESVILLE FL 32609-4067
TITLE	JW	4.1 TITLE	JUNIOR WARDEN/D
NAME	BREEDEN, JOE	4.2 NAME	JACK PICKHAM KOON
STREET ADDRESS	3403 N.W. 158TH AVE	4.3 STREET ADDRES	RR 4 BOX 402
CITY-ST-ZIP	GAINESVILLE FL 32609-4067	4.4 CITY-ST-ZIP	ALACHUA FL 32615-9780
TITLE	T	5.1 TITLE	
NAME	COPELAND, JOHNNY F	5.2 NAME	
STREET ADDRESS	RT 1 BOX 125	5.3 STREET ADDRESS	
CITY-ST-ZIP	ALACHUA FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	SECRETARY/D ☐ Change ☐ Addition
NAME		6.2 NAME	FRED C. DUKE
STREET ADDRESS		6.3 STREET ADDRESS	P.O. Box 177 N/A
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Alachua, FL 32615

3/1/95 MS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: H. Wendel Polk — 2-7-95 — 904-354-2339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0001031