2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 12, 2004 8:00 am Secretary of State DOCUMENT # C10319 04-12-2004 90308 033 ****61.25 1. Entity Name **ENSLEY LODGE NO. 278 FREE AND ACCEPTED** MASONS OF FLORIDA Mailing Address Principal Place of Business ROY CONNOR SHEPPARD 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 City & State FEI Number 23-7526504 Applied For Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHEPPARD, ROY CONNOR Street Address (P.O. Box Number is Not Acceptable) 220 OCEAN ST 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$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. 11. WM TITLE TITLE (D) Change Delete WORSHIPFUL MASTER NAME CRUZE, CLARENCE W NAME Donald Raymond Sparks STREET ADDRESS 3481 E. KINGSFIELD RD STREET ADDRESS 7591 Tower Ridge Rd CITY-ST-ZIP PENSACOLA, FL 325149756 CITY-ST-ZIP Peniacola FL 32526-9137 SD TITLE ☐ Delete TITLE Change ☐ Addition SENIOR WARDEN KRITZMIRE, EDWARD A NAME NAME William Ervin Hall 5348 MELVIN DRIVE STREET ADDRESS STREET ADDRESS 8935 Bowman Ave PACE, FL 32571 CITY-ST-ZIP CITY-ST-7IP Pensacola FL 32534-1684 SWD Delete TITLE TITLE Addition (\overline{D}) JUNIOR WARDEN SPARKS, DONALD R NAME NAME STREET ADDRESS 9591 TOWER RIDGE RD STREET ADDRESS 1. Donald Lloyd Smith PENSACOLA, FL 32526 CITY-ST-ZIP CITY-ST-ZIP ⊇iūi_Pompαno Rd JWD Cantonment FL 32533-8638 TITLE TITLE **D**élete ☐ Addition HALL, WIILIAM E NAME NAME STREET ADDRESS 8935 BOUMAN AVE STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32534 CITY-ST-ZIP TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition JOHNSON, TROY K NAME NAME P.O. BOX 215 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GONZALEZ, FL 325600215 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 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. 904-354-2339

SIGNATURE: Edward A. Kritzmire, Secretary SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>March 29,</u> Daytime Phone #

FILED