

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2008 8:00 am**  
**Secretary of State**

03-13-2008 90035 042 \*\*\*\*61.25

<b>DOCUMENT # C10320</b> 1. Entity Name <b>ENGLEWOOD LODGE NO. 360 FREE AND ACCEPTED MASON'S OF FLORIDA</b>																																																																												
Principal Place of Business <b>ROY CONNOR SHEPPARD 220 OCEAN ST JACKSONVILLE, FL 32202 US</b>			Mailing Address <b>ROY CONNOR SHEPPARD 220 OCEAN ST JACKSONVILLE, FL 32202 US</b>																																																																									
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 <b>59-6174899</b>																																																																								
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>																																																																								
6. Name and Address of Current Registered Agent  <b>SHEPPARD, ROY CONNOR 220 OCEAN STREET JACKSONVILLE, FL 32202</b>																																																																												
7. Name and Address of New Registered Agent  <b>Lynn, Richard Edward 220 Ocean Street Jacksonville, Florida 32202</b>																																																																												
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.  <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>SIGNATURE</b>    <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: right;"> <b>3/10/08</b>  <small>DATE</small> </div> </div>																																																																												
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																																																																								
<b>Make check payable to Florida Department of State</b>																																																																												
<div style="display: flex;"> <div style="flex: 1;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;">Delete</td> </tr> <tr> <td></td> <td><b>SWD</b></td> <td><b>HOLLAND, ROBERT S</b></td> <td><b>139 MARK TWAIN LN</b></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td><b>WMD</b></td> <td><b>CARSTENS, ROBERT J</b></td> <td><b>7478 DANVERS CIR</b></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td><b>TD</b></td> <td><b>BATZ, RICHARD H</b></td> <td><b>7535 RATON CIR</b></td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td><b>JWD</b></td> <td><b>CRIPPS, MICHAEL E</b></td> <td><b>6463 FACET LN</b></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td><b>SD</b></td> <td><b>MCALPINE, STUART J</b></td> <td><b>3258 HENDERSON LN</b></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </table> </div> <div style="flex: 1;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">NAME</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%; text-align: center;">Change</td> <td style="width: 10%; text-align: center;">Addition</td> </tr> <tr> <td></td> <td><b>WORSHIPFUL MASTER</b></td> <td><b>Robert Starkey Holland</b></td> <td><b>139 Mark Twain Ln</b></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td><b>SENIOR WARDEN</b></td> <td><b>Michael Eugene Cripps</b></td> <td><b>6463 Facet Ln</b></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td><b>JUNIOR WARDEN</b></td> <td><b>Martin Harold Horowitz</b></td> <td><b>348 Ardenwood Dr</b></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td><b>SECRETARY</b></td> <td><b>George Gene Jeffers</b></td> <td><b>125 Winslow Ave</b></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> </div> </div>						TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete		<b>SWD</b>	<b>HOLLAND, ROBERT S</b>	<b>139 MARK TWAIN LN</b>	<input checked="" type="checkbox"/>		<b>WMD</b>	<b>CARSTENS, ROBERT J</b>	<b>7478 DANVERS CIR</b>	<input checked="" type="checkbox"/>		<b>TD</b>	<b>BATZ, RICHARD H</b>	<b>7535 RATON CIR</b>	<input type="checkbox"/>		<b>JWD</b>	<b>CRIPPS, MICHAEL E</b>	<b>6463 FACET LN</b>	<input checked="" type="checkbox"/>		<b>SD</b>	<b>MCALPINE, STUART J</b>	<b>3258 HENDERSON LN</b>	<input checked="" type="checkbox"/>					<input type="checkbox"/>	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition		<b>WORSHIPFUL MASTER</b>	<b>Robert Starkey Holland</b>	<b>139 Mark Twain Ln</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<b>SENIOR WARDEN</b>	<b>Michael Eugene Cripps</b>	<b>6463 Facet Ln</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<b>JUNIOR WARDEN</b>	<b>Martin Harold Horowitz</b>	<b>348 Ardenwood Dr</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<b>SECRETARY</b>	<b>George Gene Jeffers</b>	<b>125 Winslow Ave</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
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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.																																																																												
<b>SIGNATURE:</b> <b>GEORGE G. JEFFERS</b> <b>3/5/08</b> <b>473-2908</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																												