

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2005 8:00 am**  
**Secretary of State**

04-26-2005 90142 046 \*\*\*\*61.25

**DOCUMENT# C10335**



1. Entity Name  
CARY B. FISH LODGE NO. 346 FREE AND ACCEPTED  
MASONS OF FLORIDA

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

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



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03232005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
23-7136822

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

TITLE  
NAME WM  
NERTINGER, JACK E ☒ Delete  
STREET ADDRESS 636 W LAKE DR  
CITY-ST-ZIP SARASOTA, FL 342321953

TITLE  
NAME SW  
LEMIEUX, JEFFREY L ☒ Delete  
STREET ADDRESS 2433 TERRY LANE  
CITY-ST-ZIP SARASOTA, FL 342315932

TITLE  
NAME JW  
MARINELLI, GENE C ☒ Delete  
STREET ADDRESS 2610 WOODGATE LANE  
CITY-ST-ZIP SARASOTA, FL 342316455

TITLE  
NAME TD  
MORTON, PAUL T ☐ Delete  
STREET ADDRESS 3917 TROPICAIRES BLVD  
CITY-ST-ZIP NORTH PORT, FL 34287

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME WORSHIPFUL MASTER (D) ☒ Change ☐ Addition  
STREET ADDRESS Jeffrey L Lemieux  
CITY-ST-ZIP 4103 Linwood St  
Sarasota FL 34232-3807

TITLE  
NAME SENIOR WARDEN (D) ☒ Change ☐ Addition  
STREET ADDRESS Gene C Marinelli  
CITY-ST-ZIP 2610 Woodgate Ln  
Sarasota FL 34231-6455

TITLE  
NAME JUNIOR WARDEN (D) ☐ Change ☒ Addition  
STREET ADDRESS Anthony J Sutowski  
CITY-ST-ZIP 1024 N Lockwood Ridge Rd  
Sarasota FL 34237-8831

TITLE  
NAME SECRETARY (D) ☒ Change ☐ Addition  
STREET ADDRESS John Henry Land III  
CITY-ST-ZIP 2419 Temple St  
Sarasota FL 34239-3022

TITLE  
NAME ☐ Change ☐ Addition  
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:

*John H. Land III*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-05

Date

904-354-2339

Daytime Phone #