

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # C10339 (5)

1. Corporation Name

EUREKA LODGE NO. 269 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

06/30/1992

3a. Date of Last Report

03/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Roy Connor Sheppard

26 Roy Connor Sheppard

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

23-7526499

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHEPPARD, ROY CONNOR
220 OCEAN STREET
JACKSONVILLE FL 32202

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

100001766421

-04/02/96--01061--001

84 City

***5083.75

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE WMD ☐ DELETE
NAME SULESKI, RONALD R
STREET ADDRESS 2341 S.W. 44TH ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33312-5735

TITLE SWD ☐ DELETE
NAME HARRELL, DONALD E
STREET ADDRESS 615 NW 49TH AVENUE
CITY-ST-ZIP PLANTATION FL 33317-1433

TITLE JWD ☐ DELETE
NAME DOUGLAS, DAVID C
STREET ADDRESS 1086 NE 43RD ST
CITY-ST-ZIP FORT LAUDERDALE FL 33334-3806

TITLE TD ☐ DELETE
NAME ZABLOCKI, EDWARD J
STREET ADDRESS 10820 N.W. 19TH ST.
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE SD ☐ DELETE
NAME DRESSEL, CHARLES J
STREET ADDRESS 13311 SW 14TH PL.
CITY-ST-ZIP FORT LAUDERDALE FL 33325-5724

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1

1. WORSHIPFUL MASTER (D)
1. RONALD RICHARD SULESKI
1. 2341 S.W. 44TH ST.
1. FT. LAUDERDALE FL 33312-5735

2

2. SENIOR WARDEN (D)
2.2 NAME LYLE ALFRED PALMER
2.3 STREET ADDRESS 1421 N. 66TH AVE.
2.4 CITY-ST-ZIP HOLLYWOOD FL 33024-5830

3

3.1 TITLE JUNIOR WARDEN (D)
3.2 NAME DANIEL RIZZI
3.3 STREET ADDRESS 5245 S W 90TH AVE
3.4 CITY-ST-ZIP COOPER CITY FL 33328

4

4.1 TITLE TREASURER (D)
4.2 NAME WILLIAM HENRY WINTHERS JR
4.3 STREET ADDRESS PO BOX 424 N/A
4.4 CITY-ST-ZIP DANIA FL 33004-0424

5

5.1 TITLE SECRETARY (D)
5.2 NAME CHARLES JOHN DRESSEL
5.3 STREET ADDRESS 13311 SW 14TH PL
5.4 CITY-ST-ZIP FORT LAUDERDALE FL 33325-5724

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD R. SULESKI 3-5-96 (954) 581-5755

Date

Daytime Phone #

CR2E037 (12/95)

4-2-1996