

# 2020 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # C10339

1. Entity Name

EUREKA LODGE NO. 269 FREE AND ACCEPTED MASONS OF

**FILED**  
**Mar 29, 2000 8:00 am**  
**Secretary of State**

03-29-2000 90046 001 \*6,125.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
ROY CONNOR SHEPPARD  
220 OCEAN ST.  
JACKSONVILLE FL 32202

Mailing Address  
ROY CONNOR SHEPPARD  
220 OCEAN ST.  
JACKSONVILLE FL 32202-3218

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number  
23-7526499

Applied For  
Not Applicable

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.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. DIRECTORS IN 10

TITLE JWD  
NAME BASS, BROUGHER D  
STREET ADDRESS 4850 N 36TH CT  
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE JUNIOR WARDEN (D)  
NAME Cecil Clyde Smart Jr  
STREET ADDRESS 5081 SW 28th Avenue  
CITY-ST-ZIP Danis FL 33312

TITLE D  
NAME RIZZI, DANIEL  
STREET ADDRESS 5245 SW 90TH AVE  
CITY-ST-ZIP COOPER CITY FL 33328

TITLE TREASURER (D)  
NAME Daniel Rizzi  
STREET ADDRESS 5245 S W 90th Ave  
CITY-ST-ZIP Cooper City FL 33328

TITLE TD  
NAME HARRELL, DONALD EUGENE  
STREET ADDRESS 615 NW 49TH AVENUE  
CITY-ST-ZIP PLANTATION FL 33317-1433

TITLE WORSHIPFUL MASTER (D)  
NAME Tommy Marshall  
STREET ADDRESS 3740 S W 45th Terr  
CITY-ST-ZIP Hollywood FL 33023

TITLE SD  
NAME DRESSEL, CHARLES JOHN  
STREET ADDRESS 13311 SW 14TH PL  
CITY-ST-ZIP FT LAUDERDALE FL 33325-5724

TITLE SENIOR WARDEN (D)  
NAME Brougher DeHart Bass  
STREET ADDRESS 4850 N 36th Ct  
CITY-ST-ZIP Hollywood FL 33021

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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: Daniel Rizzi 3/13/00 954/434-3772

CR2E037 (9/99)