

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10366

FILED
Feb 01, 2009
Secretary of State

Entity Name: MOST EXCELLENT GRAND CHAPTER OF ROYAL ARCH MASONS OF FLORIDA

Current Principal Place of Business:

701 SPRUCE AVE
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2740
LAKE PLACID, FL 33862 US

New Mailing Address:

FEI Number: 59-0246708 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STEELE, STEVEN Q
210 ANNA MARIA WAY NE
LAKE PLACID, FL 33852 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FOREMAN, RICHARD E
Address: 4316 NORTH SHORE ROAD
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: S () Delete
Name: STEELE, STEVEN Q
Address: PO BOX 2740
City-St-Zip: LAKE PLACID, FL 338622740 US

Title: D () Delete
Name: DALE, DANIEL E
Address: 601 14TH AVENUE W
City-St-Zip: PALMETTO, FL 342214522

Title: D () Delete
Name: RUDMAN, JAMES P
Address: 8545 E KEATING PARK STREET
City-St-Zip: FLORAL CITY, FL 34436

Title: D () Delete
Name: D'ANGINA, DARRYL A
Address: 3146 LAURAL GROVE
City-St-Zip: JACKSONVILLE, FL 322237335

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RUDMAN, JAMES P
Address: 8545 E KEATING PARK STREET
City-St-Zip: FLORAL CITY, FL 34436

Title: D (X) Change () Addition
Name: MAROTTA, ANTHONY J
Address: 675 N HEATHROW AVENUE
City-St-Zip: LECANTO, FL 34461-925

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN Q. STEELE

SECY

02/01/2009

Electronic Signature of Signing Officer or Director

Date