


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90066 024 ****61.25

DOCUMENT # C10369	
1. Entity Name PILGRIM COMMANDERY NO. 7 KNIGHTS TEMPLAR	

Principal Place of Business 2121 NE 55TH BLVD GAINESVILLE FL 32641 US	Mailing Address P.O. BOX 972 GAINESVILLE FL 32602
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2. Principal Place of Business 130 NE 910TH AVENUE	3. Mailing Address P.O. BOX 972
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State BRANFORD, FL	City & State BRANFORD, FL
Zip 32008-8913	Zip 32602
Country Dixie	Country Alachua



1st MOORE CR2E037 (10/04)

4. FEI Number 59-6144955	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WARD, HARVEY L 2121 NE 55TH BLVD GAINESVILLE FL 32641	7. Name and Address of New Registered Agent Name WILLIAM H. SCHREIBER Street Address (P.O. Box Number is Not Acceptable) 130 NE 910TH AVENUE City BRANFORD FL Zip Code 32008
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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 William H. Schreiber, WILLIAM H. SCHREIBER, SECRETARY 02-10-2005
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 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OSGOOD, HOWARD B 103 NW 40TH DR. GAINESVILLE FL 32607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THIGPEN, WAYNE Y P.O. BOX 142491, 6400 NW 106 PL. #9A GAINESVILLE FL 32614-2491 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEDGE, EDWARD C JR. 10926 NW 31ST. PL. GAINESVILLE FL 32606 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS WARD, HARVEY L 2121 NE 55 BLVD GAINESVILLE FL 32609 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D WARD, HARVEY L 2121 NE 55 BLVD GAINESVILLE, FL 32609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, DANIEL F 245 NE 8TH AVE. LAKE BUTLER FL 32054 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition TS WILLIAM H. SCHREIBER 130 NE 910TH AVENUE BRANFORD, FL 32008-8913

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: William H. Schreiber, WILLIAM H. SCHREIBER 02/10/2005 542-9993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #