


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90023 048 ****61.25

DOCUMENT # C10369 1. Entity Name PILGRIM COMMANDERY NO. 7 KNIGHTS TEMPLAR					
Principal Place of Business 130 NE 910TH AVENUE BRANFORD, FL 32008-8913 US				Mailing Address P.O. BOX 972 GAINESVILLE, FL 32602	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
<i>NO CHANGE</i>		<i>NO CHANGE</i>			
4. FEI Number 59-6144955				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHREISER, WILLIAM H 130 910TH AVENUE BRANFORD, FL 32008			7. Name and Address of New Registered Agent Name SCHREIBER, WILLIAM H. Street Address (P.O. Box Number is Not Acceptable) <i>TO CORRECT SPELLING of Registered Agent name. No changes in address.</i> 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 <i>William H. Schreiber, William H. Schreiber, Secretary</i> 01-21-2006 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
Filing Fee is \$61.25 Due by May 1, 2006		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OSGOOD, HOWARD B <input type="checkbox"/> Delete 103 NW 40TH DR. GAINESVILLE, FL 32607		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 <input checked="" type="checkbox"/> Delete P.O. BOX 142491, 6400 NW 106 PL. #9A GAINESVILLE, FL 326142491		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENNIS E. HASKINS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6705 NW 52ND TERRACE GAINESVILLE, FL 32653	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEDGE, EDWARD C JR. <input checked="" type="checkbox"/> Delete 10926 NW 31ST. PL. GAINESVILLE, FL 32606		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDWARD L. CLIFFORD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2930 SW 23RD TERR, #2006 GAINESVILLE, FL 32608	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARD, HARVEY L <input type="checkbox"/> Delete 2121 NE 55 BLVD GAINESVILLE, FL 32609		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, DANIEL F <input type="checkbox"/> Delete 245 NE 8TH AVE. LAKE BUTLER, FL 32054		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS SCHREIBER, WILLIAM H <input type="checkbox"/> Delete 130 NE 910TH AVENUE BRANFORD, FL 320088913		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>William H. Schreiber, William H. Schreiber</i> 01-21-2006 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					