

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90038 002 ****61.25

DOCUMENT # C10378

1. Entity Name
LAKE CITY CHAPTER NO. 38 ROYAL ARCH MASONS



Principal Place of Business
**L C LODGE #27
LAKE CITY, FL 32056-1328**

Mailing Address
**PO BOX 844 1173
LAKE CITY, FL 32056-844 1173**

40014039



01232008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1821802

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MCDavid, TERRY
178 SE HERNANDO AVE
LAKE CITY, FL 32025**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
TAYLOR, WILLIAM R
209 SE CENTRAL AVE
JASPER, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
MORGAN, JERRY R
PO BOX 2602 N/A
LAKE CITY, FL 320562602**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BEECHER, CHARLES E
745 THERESA ST
LAKE CITY, FL 32055**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
MOORE, HUGH F
PO BOX 844 N/A
LAKE CITY, FL 320560844**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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 any attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

24 January 2008

Daytime Phone #