2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # C10384 04-25-2005 90254 021 ****61.25 ADONIRAM COUNCIL NO. 10, ROYAL AND SELECT **MASTERS** Mailing Address Principal Place of Business 20044830 1690 NW NORTH RIVER DR 1690 NW NORTH RIVER DR MIAMI, FL 33125 MIAMI, FL 33125 2. Principal Place of Business 3. Mailing Address P, O, BOX 970470 150 WEST 20TH STREET Suite, Apt. #, etc. Suite, Apt. #, etc. 04152005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 59-1833281 HIALEAH, FLORIDA MIAMI, FLORIDA Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33011 33197 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SHILEY, JOHN G. 5841 SW 80TH STREET Street Address (P.O. Box Number is Not Acceptable) SOUTH MIAMI, FL 33143 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be . 🖂 Due by May 1, 2005 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete ME Addition NAME GLOCKMAN, WILLIAM NAME STREET ADDRESS 9830 SW 114TH STREET STREET ACCRESS CITY-ST-ZIP MIAMI, FL 33176 CITY-ST-ZEP TITLE ☐ Delete TITLE Change Addition NAME BRANDAO, EDUARDO L MARTIN, JOSEPH M MARKE STREET ADDRESS 14240 S. W. 79TH COURT 2101 SW 56TH TER STREET ADDRESS CITY-ST-71P HOLLYWOOD, FL 33023 CITY-ST-ZIP MIAMI, FL 33158 MAF ☐ Delete me_ **€** Change ■ Addition MAME THURMOND, TOM E JR DALTON, GREGORY D. ---NAME STREET ADDRESS 9905 SW 90TH AVE 10990 S. W. 91ST STREET STREET ADDRESS CTY-ST-71P MIAMI, FL 33176 MIAMI, FL 33176 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME CHIPOURAS, GEORGE A NAME STREET ADORESS 19460 S.W. 87TH AVENUE STREET ADORESS CITY.ST. 7ID MIAMI, FL 33157 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME COCKRELL, DAVID A. FACKLER, LEROY E NAME STREET ADDRESS 1301 N.W. 112TH ST. 9946 N. W. 49TH TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL MIAMI, FL 33178 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

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.

MAKE

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

CHIPOURAS, GEORGE A

19460 S.W. 87TH AVENUE

MIAMI, FL 33157

hoporous

april 21, 2005

505-253-7513

FILED