2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # C10389

1. Entity Name



FILED Mar 17, 2006 8:00 am Secretary of State 03-17-2006 90127 016 ****61.25

LAWTEY MASTERS	COUNCIL NO. 39 ROYAL A	AND SELECT			·	3 1 / 2 000 3			
Principal Place of Business 24716 GROVE STREET P.O. BOX 431 LAWTEY, FL 32058-0431 US		Mailing Address 24716 GROVE STREET P.O. BOX 431 LAWTEY, FL 32058-0431 US		1		EIDII BIBNI BIBNI			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03092006 Ct	ng-NP	CR2E03	7 (11/05)	
City & State		City & State			4. FEI Number Applied For 59-1881520 Not Applied For				
Zip	Country	Zip	Country		5. Certificate of Sta			\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent	Name		7. Name and Add	ress of New Re	egistered A	gent	
BEEMAN, ERNEST W 2553 SE 144TH STREET					(P.O. Box Number is Not Acceptable)				
STARKE, F	-L 32091			**					, ,
			City				FL	Zip Code	9
	named entity submits this statement fo ons of registered agent.	or the purpose of changing its	registered office	or register	red agent, or both, in	the State of Flo	rida. I am l	amiliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent arg	nature required	d when reinstating)	<u> </u>	DATE	<u> </u>	
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2006	9. Election Cam Trust Fund C	npaign Financing		\$5.00 May Be Added to Fees		ake check	payable to	
	Filing Fee is \$61.25	9. Election Cam Trust Fund C	npaign Financing	, _□	\$5.00 May Be	Flori	ake check da Depart	ment of Si	ate
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DI	9. Election Cam Trust Fund C	npaign Financing contribution.	, _□	\$5.00 May Be Added to Fees	Flori	ake check da Depart	ment of Si	ate
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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:

ME OF SIGNING OFFICER OR DIRECTOR

3-15-06