2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 21, 2000 8:00 am Secretary of State **DOCUMENT # C10390** 1. Entity Name COEUR DE LION COMMANDRY NO. 1, KNIGHTS TEMPLAR 03-21-2000 90025 013 \*\*\*\*61.25 Mailing Address Principal Place of Business 1090 SENIC HIGHWAY P. O. BOX 1813 PENSACOLA FL 32598-1813 PENSACOLA FL 32503 2. Principal Place of Business 3. Mailing Address 189 W. Airport Blvd 189 W. Airport Blvd. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 23-7618329 Pensacola, Florida Pensacola, Florida Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CALDWELL, DREXEL P 2110 W CYPRESS ST PENSACOLA FL 32501 City Zip Code FL 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE D ☐ Change **X**Addition TITLE NAME PEREZ. CHARLES NAME SILER, ARNOLD J., SR. STREET ADDRESS STREET ADDRESS 7649 N POINTE DR 8404 WILLIAMSBURG CIRCLE CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32514 PENSACOLA, FL 32514-6865 ☐ Addition TITLE ☐ De¹ete TITLE ☐ Change HENDRIX, CHARLES A NAME NAME STREET ADDRESS 5799 YUCCA DR STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MILTON FL 32583 Change Addition TITLE Delete TITLE GARRETT, MARVIN P NAME NAME GILMAN, RICHARD A STREET ADDRESS 3471 EDINBURGH DR STREET ADDRESS 4168 AQUA VISTA DRIVE CITY-ST-ZIP CITY-ST-ZIP PACE FL 32571 PENSACOLA, FL 32504 ☐ Change Addition TITLE Delete TITLE CALDWELL, DREXEL P NAME STREET ADDRESS STREET ADDRESS 2110 W CYPRESS ST CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

March 13.

Daytime Phone #

SIGNATURE: