

2001 UNIFORM BUSINESS REPORT (UBR)

1/3

FILED
Feb 26, 2001 8:00 am
Secretary of State

01-30-2001 90080 049 *****61.25

DOCUMENT # C10390

1. Entity Name

COEUR DE LION COMMANDRY NO. 1, KNIGHTS TEMPLAR

Principal Place of Business

189 W. AIRPORT BLVD
PENSACOLA FL 32503

Mailing Address

189 W. AIRPORT BLVD
PENSACOLA FL 32503
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7618329

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALDWELL, DREXEL P
2110 W CYPRESS ST
PENSACOLA FL 32501

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Drexel P. Caldwell

1-17-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete
NAME PEREZ, CHARLES
STREET ADDRESS 7649 N POINTE DR
CITY-ST-ZIP PENSACOLA FL 32514

TITLE SR ☒ Change ☐ Addition
NAME PEREZ, CHARLES
STREET ADDRESS 7649 Northpointe Drive
CITY-ST-ZIP Pensacola, FL 32514

TITLE D ☐ Delete
NAME HENDRIX, CHARLES A
STREET ADDRESS 5799 YUCCA DR
CITY-ST-ZIP MILTON FL 32583

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME GILMAN, RICHARD A
STREET ADDRESS 4188 AQUA VISTA DRIVE
CITY-ST-ZIP PENSACOLA FL 32504

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE R ☒ Delete
NAME CALDWELL, DREXEL P
STREET ADDRESS 2110 W CYPRESS ST
CITY-ST-ZIP PENSACOLA FL

TITLE D ☐ Change ☒ Addition
NAME Arthur J. Larose
STREET ADDRESS 2646 Sherrilane Drive
CITY-ST-ZIP Cantonment, FL 32533

TITLE D ☒ Delete
NAME SILER, ARNOLD J SR
STREET ADDRESS 8404 WILLIAMBURG CIRCLE
CITY-ST-ZIP PENSACOLA FL 32514-6885

TITLE D ☐ Change ☒ Addition
NAME BRYANT, John R. Jr
STREET ADDRESS 3251 HWY 97 South
CITY-ST-ZIP Cantonment, FL 32533

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 671, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-15-01 850 969 9016

CR2037 (10/00)