

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90001 011 ****61.25

DOCUMENT # C10393

1. Entity Name

PALATKA COMMANDERY NO. 5, KNIGHTS TEMPLAR



Principal Place of Business

1334 CRILL AVE.
PALATKA FL 32177

Mailing Address

P.O. BOX 2294
PALATKA FL 32178-2294
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1830758

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

WILKINSON, DAVID C
118 RANCHETTE TRAIL
PALATKA FL 32177

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. 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

FILE NOW - FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to:
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☒ Delete
NAME HAWKINS, WILLIS J
STREET ADDRESS 128 MAGNOLIA ST.
CITY-ST-ZIP SATSUMA FL 32189-2824

TITLE ☐ Delete
NAME NILES, ROBERT A
STREET ADDRESS PO BOX 224
CITY-ST-ZIP SAN MATEO FL 32187

TITLE ☐ Delete
NAME DARDEN, JOHN D
STREET ADDRESS 120 HILTY LANE
CITY-ST-ZIP EAST PALATKA FL 32131

TITLE ☐ Delete
NAME BUCK, WILLIAM L JR
STREET ADDRESS 1307 S 14TH STREET
CITY-ST-ZIP PALATKA FL 32177

TITLE ☐ Delete
NAME WILKINSON, DAVID C
STREET ADDRESS 118 RANCHETTE TRAIL
CITY-ST-ZIP PALATKA FL 32177

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE ☒ Change ☐ Addition
NAME Director
STREET ADDRESS David C. Wilkinson
CITY-ST-ZIP 118 Ranchette Trail
PALATKA, FL 32177

TITLE ☐ Change ☒ Addition
NAME Recorder
STREET ADDRESS Fred Piasecki
CITY-ST-ZIP 140 Santa Rosa St
FLORAHOME, FL 32140

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: David C. Wilkinson

2-18-08

396-329-4052