

FILE NOW: FILING FEE IS \$61.25

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Mar 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **C10395** (7)
1. Corporation Name
HIRAM COUNCIL NO. 13 ROYAL AND SELECT MASONS



Principal Place of Business 3845 CATALINA ST. TITUSVILLE FL 32796	Mailing Address 3845 CATALINA ST. TITUSVILLE FL 32796-2210
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3. Date Incorporated or Qualified 06/15/1953	3a. Date of Last Report 02/23/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 23-7583213	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent YOUNG, WM. ROBERT 3845 CATALINA ST. TITUSVILLE FL 32796	10. Name and Address of New Registered Agent 81 Name ROBERT W. MOYER 82 Street Address (P.O. Box Number is Not Acceptable) 3575 PALMER DR 84 City TITUSVILLE FL 85 Zip Code 32780
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **ROBERT W. MOYER** *Robert W Moyer* **3-17-97**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOYER, ROBERT 3575 PALMER DRIVE TITUSVILLE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	1. M. GLENN, FRANK 1621 COCOA BLVD. COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES, GEORGE H 988 SARAZAN DRIVE ROCKLEDGE FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D DAN FITCH 1240 TROPICAL COVE TR. MERRITT ISLAND, FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLENN, FRANK 1621 COCOA BAY BLVD COCO FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D JAMES, GEORGE 988 SARAZAN DR ROCKLEDGE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MALONE, GEORGE E 1707 GOLFVIEW DR ROCKLEDGE FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	T DREIER, WILLIAM 4920 KEY LARGO DR TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S YOUNG, WM. ROBERT 3845 CATALINA ST. TITUSVILLE FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	S MOYER, ROBERT W 3575 PALMER DR TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **ROBERT W. MOYER** *Robert W Moyer* **3-17-97** **407.269.5649**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0015682

CR2E037 (9/96)