

DOCUMENT # C 10397

1. Entity Name

INDIAN RIVER CHAPTER NO. 27, ROYAL ARCH
MASONS

Principal Place of Business

Mailing Address

40 CARMALT ST
COCOA, FL 32922
USCOCOA YORK RITE BODIES
2360 BAL HARBOUR TERRACE
TITUSVILLE, FL 32780
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

23-7591081

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DREIER, WILLIAM C.
4120 KEY LARGO DR
TITUSVILLE, FL 32780

7. Name and Address of New Registered Agent

Name BROWN, VIRGIL P. JR
Street Address (P.O. Box Number is Not Acceptable)
2360 BAL HARBOUR TERRACE
City TITUSVILLE FL Zip Code 32780

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 VIRGIL P. BROWN JR. SECRETARY
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12 April 2002

FILE NOW! FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME JAMES, GEORGE H. ☒ Delete
STREET ADDRESS 988 SARAZAN DR.
CITY-ST-ZIP ROCKLEDGE, FLTITLE D
NAME WOLFE, RICHARD A. ☒ Delete
STREET ADDRESS 1600 SANDPIPER DR
CITY-ST-ZIP MERRITT ISLAND, FLTITLE D
NAME POOLE, WALTER R. ☒ Delete
STREET ADDRESS 200-5 SPRING DR
CITY-ST-ZIP MERRITT ISLAND, FLTITLE M
NAME SHAFFER, BARRY R. ☒ Delete
STREET ADDRESS 350 NEWFOUND HARBOUR DR
CITY-ST-ZIP MERRITT ISLAND, FLTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE S
NAME BROWN, VIRGIL P. JR. ☐ Change ☒ Addition
STREET ADDRESS 2360 BAL HARBOUR TERRACE
CITY-ST-ZIP TITUSVILLE, FL 32780TITLE T
NAME DREIER, WILLIAM C. ☐ Change ☒ Addition
STREET ADDRESS 4920 KEY LARGO DR.
CITY-ST-ZIP TITUSVILLE, FL 32780TITLE D
NAME HINMAN, PHILLIP R. ☐ Change ☒ Addition
STREET ADDRESS 1210 GOLDEN POND LANE
CITY-ST-ZIP ROCKLEDGE, FL 32955TITLE D
NAME CULLEN, CARLOS D. ☐ Change ☒ Addition
STREET ADDRESS 985 BOUGANVILLEA DR.
CITY-ST-ZIP ROCKLEDGE, FL 32955TITLE D
NAME FOWLER, RODGER S. ☐ Change ☒ Addition
STREET ADDRESS 825 S. BANANA RIVER DR.
CITY-ST-ZIP MERRITT ISLAND, FL 32754TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP100005452101-7
-05/06/02--01021--007
*****61.25 *****61.25

CR2E037 (9/01)

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12 April 2002 321-269-5919