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Feb 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # C10411 (2)

1. Corporation Name

EMMANUEL COMMANDERY NO. 36, KNIGHTS TEMPLAR

Principal Place of Business

2111 N SPRING GARDEN AVE
DELAND FL 32720

Mailing Address

% F.R. YOUNG
623 CHERRY TREE LANE
DELAND FL 32724-75043. Date Incorporated or Qualified
06/15/19533a. Date of Last Report
03/08/1996

2. Principal Place of Business

21 2557 N. Spring Garden Av.

Suite, Apt. #, etc.

22 City & State

23 DeLand, Florida

24 Zip 32720

2a. Mailing Address

26 c/o B. G. Cole

Suite, Apt. #, etc.

27 643 N. Stone Street

City & State

28 DeLand, Florida

29 Zip 32720

Country

4. FEI Number
59-2356187

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

YOUNG, FREDERICK R
623 CHERRY TREE LANE
DELAND FL 32720

10. Name and Address of New Registered Agent

81 Name

COLE, BERNARD G.

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

643 North Stone Street

83

84 City

DeLand

FL

85 Zip Code 32720

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 Bernard G. Cole, Secretary

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/27/97

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME COMBS, JOHN A.
STREET ADDRESS 24018 E BOB CAT RD
CITY - ST - ZIP ASTOR FLTITLE D ☐ DELETE
NAME CANFIELD, HESTEL O.
STREET ADDRESS 785 N BOUNDARY AVE
CITY - ST - ZIP DELAND FLTITLE S ☒ DELETE
NAME YOUNG, FREDERICK R
STREET ADDRESS 623 CHERRY TREE LN
CITY - ST - ZIP DELAND FL 32724-7504TITLE D ☐ DELETE
NAME SCHUETZ, FREDERICK W
STREET ADDRESS 1419 DOUGLAS AVENUE
CITY - ST - ZIP DELAND FLTITLE T ☐ DELETE
NAME MULLER, JOHN W
STREET ADDRESS 708C E MINNESOTA AVE
CITY - ST - ZIP DELAND FLTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME SCHUCK, WILLIAM
1.3 STREET ADDRESS 726 North Florida Ave
1.4 CITY - ST - ZIP DeLand, Florida 327202.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP3.1 TITLE S ☒ Change ☐ Addition
3.2 NAME COLE, BERNARD G.
3.3 STREET ADDRESS 643 North Stone Street
3.4 CITY - ST - ZIP DeLand, Florida 327204.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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, unchanged, or on an attachment with an address.

SIGNATURE:

BERNARD G. COLE

1/27/97

(904) 734-4074

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0013534

CP2E037 (9/96)