

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10421

FILED
Mar 21, 2009
Secretary of State

Entity Name: PALATKA COUNCIL NO. 18, ROYAL AND SELECT MASTERS

Current Principal Place of Business:

1334 CRILL AVE.
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2294
PALATKA, FL 321782294 US

New Mailing Address:

FEI Number: 59-1830758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKINSON, DAVID C
118 RANCHETTE TRL
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NILES, ROBERT A
Address: PO BOX 224
City-St-Zip: SAN MATEO, FL 32187

Title: D () Delete
Name: WILKINSON, DAVID C
Address: 118 RANCHETTE TRL
City-St-Zip: PALATKA, FL 32177

Title: T () Delete
Name: DARDEN, JOHN D
Address: 120 HILTY LN
City-St-Zip: EAST PALATKA, FL 32131

Title: D () Delete
Name: BUCK, WILLIAM L
Address: 1307 SOUTH 14TH STREET
City-St-Zip: PALATKA, FL 32177

Title: R () Delete
Name: PLASECKI, FRED
Address: 140 SANTA ROSA ST
City-St-Zip: FLORAHOME, FL 32140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PRESTON, JR, GEORGE E
Address: 108 CHEFFEY RD
City-St-Zip: PALATKA, FL 32177

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: R (X) Change () Addition
Name: WILKINSON, DAVID C
Address: 118 RANCHETTE TRAIL
City-St-Zip: PALATKA, FL 32177

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID C. WILKINSON

Electronic Signature of Signing Officer or Director

REC.

03/21/2009

_____ Date