## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # C10423**

1. Entity Name SANFORD COUNCIL NO. 20, ROYAL AND SELECT MASTERS



**FILED** Jan 16, 2007 8:00 am Secretary of State 01-16-2007 90259 009 \*\*\*\*70.00



	-					1	ILLI						
212 N. PARI	212 N. PARK AVENUE 21			ailing Address 12 N PARK AVE ANFORD, FL 32771-1267 US							50	00011	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address													
Suite, Apt. #, etc.				Suite, Apt. #, etc.				01082007 <sub>C</sub>	hg-NP	CR2E	037 (12/06)		
City & State			City & State					4. FEI Number 59-180030	)6			oplied For	
Zip	Zip Country			Zip Count				5. Certificate of St		X	\$8.75 Add	litional	
6. Name and Address of Current Register				ad Agent				7. Name and Add	ress of New F	Registered	······································		
			<del></del>			Name							
FREDEY, DANA L 2765 SAWDUST COURT OVIEDO, FL 32765				Street Address			ddress (I	(P.O. Box Number is Not Acceptable)					
				City						F	Zip Cod	e	
6 77	FL   <sup>Zip Code</sup>												
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature. Speed or protect agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE													
									Γ				
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees			ck payable to artment of Si	- 1	
10.	7).	OFFICERS AND DIF	ECTORS		11.		-	ODITIONS/CHANG	ES TO OFFICE	RS AND D	DIRECTORS IN	10	
TITLE	T			☐ Delete	TITLE		DIRW	ctv			Change	Addition	
NAME	GAINES,	FREDERIC F JR			NAME	:		`			<b>/</b> -	_	
STREET ADDRESS	702 OAK	AVE			STREE	T ADDRESS							
CHTY-ST-ZIP	SANFORD	D, FL 32771			CITY-	S7-ZIP							
TITLE	С			Delete	TITLE		-				Change	Addition	
NAME	GAINES, F	REDERIC F JR			NAME	:							
STREET ADDRESS	702 OAK	AVE			STREE	T ADDRESS							
CITY-ST-ZIP	SANFORE	), FL 327712531	•		CITY-	ST-ZIP						1	
TITLE	D			☐ Delete	TITLE					• • • • • • • • • • • • • • • • • • • •	☐ Change	Addition	
NAME	MORRIS,	ROBERT M			NAME							_	
STREET ADDRESS	370 MCCL	AIN LANE			STREE	T ADDRESS							
CITY-ST-ZIP	GENEVA,	FL 32732			CITY-	ST-ZIP							
TITLE	s			☐ Delete	TITLE		Dige	CHAR	• • • • • • • • • • • • • • • • • • • •		Change	☐ Addition	
NAME	BROWN, I	DAVID			NAME						~ •	_	
STREET ADDRESS	912 N FAII	RBAIN DR			STREE	T ADDRESS							
CITY-ST-ZIP	DELTONA	, FL 32725			CITY-	ST-ZIP						1	
TIFLE	D			Delete	TITLE						Change	Addition	
NAME	NASH, JAI	MES A			NAME							Ì	
STREET ADDRESS	186 FORE					T ADDRESS							
CITY-ST-ZIP	DEBARY,	FL 32713			CITY-	ST-ZIP							
mue	D			☐ Delete	TITLE		11201	surer / Seci	Rether		Change	Addition	
NAME	FREDEY,				NAME			•	d			}	
STREET ADDRESS	2765 SAW					T ADDRESS						İ	
CITY-ST-ZIP	OVIEDO, I					ST-ZIP						l	
12. I hereby of indicated	certify that the on this report	information supplied with t or supplemental report is	this filing true and	does not qualify for accurate and that m	the exer	nptions co ure shall ha	ntained ave the s	in Chapter 119, Flor ame legal effect as i	ida Statutes. I If made under	further ce oath; that	rtify that the in am an officer	formation or director	

mpowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if sp., with all other like empowered. of the corporation or the i changed, or on an attach

SIGNATURE:

DANA L. FREDEY

407-304-6410