FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #1. Corporation Name C10430

(2)

ST. JOHNS CHAPTER NO. 4, ROYAL ARCH MASONS

Principal Place of Business Mailing Address						DON BROWN DIGHT DIGHT BURNT BOOKE BUDIT OF BE
2111 N SPRING GARDEN AVENUE % F.R. YOUNG DELAND FL 32720 623 CHERRY TREE L		ANE				
		DELAND FL 32724-750)4		Date Incorporated or Qualified	3a. Date of Last Report
					06/15/1953	03/15/1995
	Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
		26			59-3037115	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required	
23	28				Trust Fund Contribution	S5.00 May Be Added to Fees
Ζφ	Country	Zip	Country		8. This corporation has liability for inf	
24	25	29	30			Yes No
	9. Name and Address of Curren	t Hegistered Agent	81	Name	10. Name and Address of New Re-	gistered Agent
VOIBIO	EDEDEDIOV D		["	Name		
YOUNG, FREDERICK R 82 Street Address (P.O. Box Number is Not Acceptable)						
623 CHERRY TREE LANE DELAND FL 32724			83			
•						
•			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statut	tes, the above r	named corp	oration submits this statement for the purpo	
	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti			oration's bo	oration stibilitis this statement for the purpo pard of directors. I hereby accept the appoin	ntment as registered agent. I am
SIGNATURE						
	Signature, typed or printed name of registered agent			t signature requ	red when reinstating)	DATE
12.	OFFICERS AND DIRECTORS DELETE		13.	·	ADDITIONS/CHANGES TO OFFIC	
NAME	COMBS, JOHN A	□ Dtreit	1.1 TITLE			Change Addition
STREET ADDRESS	24016 E. BOBCAT RD.		1.3 STREET	ADDRESS		
City-St-ZiP	ASTOR FL		1.4 CITY - S			
TITLE	D	X DELETE	2 1 TITLE	1-211	D	Change Addition
NAME	EBERT, ARTHUR C.		2.2 NAME		Van Ness, Pete	
STREET ADDRESS	960 DELTONA BOULEVARD		23 STREFT	ADDRESS	229 S. Blue Lake Ave.	
CHTY-ST-ZIP	DELTONA FL		2 4 CITY - S	it- ž iP	De Land. FL 32724	
TITLE	D	☐ DELETE	3 1 TITLE			☐ Change ☐ Addition
NAME	SCHUCK, WILLIAM		3 2 NAME			
STREET ADDRESS	726 NORTH FLORIDA AVENU	Ł	. 33 STREET			
CITY - ST - ZIP	DELAND FL T		3.4. CITY -S 4.1 TITLE	I - ZIP		Chagas Addition
NAME	MULLER, JOHN W		4 1 IIILE 4 2 NAME			Change Addition
STREET ADDRESS	708C E MINNESOTA AVE		4 3 STREET	ADDRESS		
CITY-ST-ZIP	DELAND FL 32724		4 4 CITY-S	1		
TITLE	\$	DELETE	5 1 TITLE			☐ Change ☐ Addition
NAME	Young, Frederick R.		5 2 NAME	ľ		
SZEROCA TEERTS	623 CHERRY TREE LANE		5 3 STREET	ADDRESS		
CITY - ST - ZIP	DELAND FL 32724-7504		5.4 CHTY-S	r-ZIP		
TITLE		DELETE	61 TIFLE			Change Addition
NAME CIRCULADDOCCO			6 2 NAME			
STREET ADDRESS CITY - ST - ZIP			6 3 STREET			
14. I do hereb	ly certify that the information supplied v	vith this filing is voluntarily furr	64 City-Sinished and does	not qualify	for the exemption stated in Section 119.07	7(3)/k) Florida Statutes I further
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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: Frederick R. YOUNG Feb. 6, 1996 (904) 736-7410 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Dayland Provision						