

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 22, 2004 8:00 am**  
**Secretary of State**

03-22-2004 90091 044 \*\*\*\*61.25

**DOCUMENT # C10432**

1. Entity Name

LAKELAND CHAPTER NO. 29 ROYAL ARCH MASONS



Principal Place of Business

1106 E MAIN ST  
LAKELAND FL

Mailing Address

141 SHADOW LN  
LAKELAND FL 33813  
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

23-7591083

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

YOUNG, DUANE B  
141 SHADOW LN  
LAKELAND FL 33813

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DT  
NAME CAPPS, CHARLES A. ☐ Delete  
STREET ADDRESS 1910 ELM ROAD  
CITY-ST-ZIP LAKELAND FL

TITLE DS  
NAME YOUNG, DUANE B ☐ Delete  
STREET ADDRESS 141 SHADOW LN  
CITY-ST-ZIP LAKELAND FL 33813-3594

TITLE D  
NAME LANIER, CHARLES R SR ☐ Delete  
STREET ADDRESS 717 GRIFFIN RD  
CITY-ST-ZIP LAKELAND FL 33805

TITLE DP  
NAME BRIGHAM, ROBERT G ☐ Delete  
STREET ADDRESS PO BOX 312  
CITY-ST-ZIP LAKE ALFRED FL 33850

TITLE D  
NAME PAUGH, JOHN H ☐ Delete  
STREET ADDRESS 4710 VALLEY HILL CT  
CITY-ST-ZIP LAKELAND FL 33813

TITLE DV  
NAME BARNABY, DONALD R ☐ Delete  
STREET ADDRESS 7036 DOEHRING DR.  
CITY-ST-ZIP LAKELAND FL 33809

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DV ☒ Change ☐ Addition  
NAME WYLLIE, WILLIAM F.  
STREET ADDRESS 2404 CLEVELAND HEIGHTS BLVD  
CITY-ST-ZIP LAKELAND, FL 33803

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:** Duane B. Young **DUANE B. YOUNG**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**863-646-6695**

Daytime Phone #