2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10442

FILED Feb 25, 2009 Secretary of State

Entity Name: SURF CHAPTER NO. 57 ROYAL ARCH MASONS

Current Principal Place of Business: New Principal Place of Business: 133 BROOKS STREET FT WALTON BEACH, FL 32548 **Current Mailing Address: New Mailing Address:** 195 DELUNA ROAD SW 330 WOODROW ST NW95 DELUNA ROAD SW FT. WALTON BEACH, FL 32548 US FT. WALTON BEACH, FL 32547 FEI Number: 59-1889199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOWARD, WILLIAM A S HOWARD, WILLIAM A S 195 DELUNA RD 330 WOODROW STREET NW FT WALTON BEACH, FL 32548 US FT WALTON BEACH, FL 32547 US 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: WILLIAM A HOWARD 02/25/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DURHAM, JAMES A P Name: Name: Address: P.O. BOX 6 Address: City-St-Zip: VALPARAISO, FL 32580 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: PYBUS, BRANDON S D Name: Address: 308 MIRACLE STRIP PKWY #31D Address: City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: Title: () Delete Title: () Change () Addition HOWARD, WILLIAM A T Name: Name: 195 DELUNA ROAD SW Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 US City-St-Zip: () Delete Title: Title: () Change () Addition WATERS, CARL E D Name: Name: 1033 BLVD PARISIENCE Address: Address: City-St-Zip: MARY ESTHER, FL 32569 US City-St-Zip:

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: WILLIAM A HOWARD S 02/25/2009