2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# C93000000003

Entity Name: TYLER COUNCIL NO. 4 ROYAL AND SELECT MASTERS

Current Principal Place of Business:

% OLIN S. WRIGHT MASONIC TEMPLE
304 ACACIA STREET
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

533 SCHUETTE RD.
PLANT CITY, FL 33567

New Mailing Address:

FEI Number: 59-1811798 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILLESPIE, LARRY R
533 SCHUETTE RD.
PLANT CITY, FL 33567 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:	STEELE, THOMAS L	
Address:	1107 PINEDALE DR	
City-St-Zip:	PLANT CITY, FL 335666819	
Title:	S	( ) Delete
Name:	GILLISPIE, LARRY R	
Address:	533 SCHETTE RD	
City-St-Zip:	PLANT CITY, FL 335671783	
Title:	T	( ) Delete
Name:	MASON, DAVID J	
Address:	519 AVOCADO CIR.	
City-St-Zip:	BRANDON, FL 33510	
Title:	D	( ) Delete
Name:	BEVLIN, THURMIN	
Address:	14021 BEVLIN ACRES LANE	
City-St-Zip:	DOVER, FL 33527	
Title:	D	( ) Delete
Name:	HANCOCK, JOHN E JR	
Address:	802 WOODLAWN AVE	
City-St-Zip:	PLANT CITY, FL 335661756	
Title:	D	(X) Delete
Name:	ATKINS, DARRELL	
Address:	507 INNERGARY PLACE	
City-St-Zip:	TAMPA, FL 33619	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	FORD, JIM	
Address:	2206 PARKWOOD DRIVE	
City-St-Zip:	VALRICO, FL 33594	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: LARRY GILLESPIE S 04/28/2006
Electronic Signature of Signing Officer or Director — Date