


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

**FILED**  
**Jan 30, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # C93000000022</b>	
1. Entity Name <b>MELITA COMMANDERY NO. 35, KNIGHTS TEMPLAR</b>	

Principal Place of Business <b>J. DEWEY HAWKINS LODGE 555 NE 42 COURT OAKLAND PARK FL 33334</b>	Mailing Address <b>WILLIAM D. SPIKER 1546 N.E. 17TH WAY FT LAUDERDALE FL 33304-1335</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

5. Name and Address of Current Registered Agent  <b>SPIKER, WILLIAM D 1546 N.E. 17TH WAY FT. LAUDERDALE FL 33304</b>	
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4. FEI Number <b>65-0450746</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	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 \_\_\_\_\_ (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 NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
<b>D LARGE, JACK M 2260 N.E. 62ND STREET FORT LAUDERDALE FL 33308</b>	
<b>D BEAUDET, MICHAEL G 1312 17TH STREET FORT LAUDERDALE FL 33315-1944</b>	
<b>T ARTEAGA, MIGUEL 7337 TEXAS TRAIL BOCA RATON FL 33021</b>	
<b>S SPIKER, WILLIAM D 1546 N.E. 17TH WAY FORT LAUDERDALE FL 33304</b>	
<b>D MEYER, EMIL S 6300 NW 20TH STREET MARGATE FL 33063-2315</b>	
<b>TITLE NAME STREET ADDRESS CITY - ST - ZIP</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>U00000023309 02/02/04-80021-014 70.00</b>	
<b>TITLE NAME STREET ADDRESS CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE NAME STREET ADDRESS CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE NAME STREET ADDRESS CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE NAME STREET ADDRESS CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:**  **William D. Spiker** **1/26/2004** **954-831-0425**