

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 28, 2002 8:00 am**  
**Secretary of State**

03-28-2002 90123 001 \*1,898.75

0002595

**DOCUMENT # N00000001711**

1. Entity Name

**RIDGE MASONIC LODGE NO. 398, INC., FREE AND ACCE  
PTED MASONS OF FLORIDA**

Principal Place of Business

Mailing Address

**C/O ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE FL 32202**

**C/O ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE FL 32202**

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

**59-3604792**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHEPPARD, ROY CONNOR  
220 OCEAN STREET  
JACKSONVILLE FL 32202**

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.

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**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	<b>S D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>DURR, JOHN J</b>	
STREET ADDRESS	<b>2340 N PUTNAM POINT</b>	
CITY-ST-ZIP	<b>HERNANDO FL 34442-5352</b>	
TITLE	<b>T D</b>	<input type="checkbox"/> Delete
NAME	<b>BOADWINE, ARCHIE B JR.</b>	
STREET ADDRESS	<b>259 W THISTLE PLACE</b>	
CITY-ST-ZIP	<b>BEVERLY HILLS FL 34465-3843</b>	
TITLE	<b>WMD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>LEE, JOHN MICHAEL</b>	
STREET ADDRESS	<b>5630 N TUMBLEWOOD DR</b>	
CITY-ST-ZIP	<b>CRYSTAL RIVER FL 34428</b>	
TITLE	<b>SWD</b>	<input type="checkbox"/> Delete
NAME	<b>MCINTOSH, JAMES MARTIN</b>	
STREET ADDRESS	<b>2705 N LIVE OAK</b>	
CITY-ST-ZIP	<b>LECANTO FL 34461</b>	
TITLE	<b>JWD</b>	<input type="checkbox"/> Delete
NAME	<b>RHODES, CHARLEY WALTER</b>	
STREET ADDRESS	<b>8065 N IBSEN DR</b>	
CITY-ST-ZIP	<b>CITRUS SPRINGS FL 34433</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>WORSHIPFUL MASTER (D)</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>James Martin McIntosh</b>	
STREET ADDRESS	<b>2705 W LIVE OAK</b>	
CITY-ST-ZIP	<b>LECANTO FL 34461</b>	
TITLE	<b>SENIOR WARDEN (D)</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Charley Walter Rhodes</b>	
STREET ADDRESS	<b>8065 N IBSEN DR</b>	
CITY-ST-ZIP	<b>CITRUS SPRINGS FL 34433</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	<b>JUNIOR WARDEN (D)</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Francis Bruce Pifer</b>	
STREET ADDRESS	<b>9040 N Golfview Dr</b>	
CITY-ST-ZIP	<b>CITRUS SPRINGS FL 34434-4823</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	<b>SECRETARY (D)</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Robert Henry Owen</b>	
STREET ADDRESS	<b>4400 N ELKCAM BLVD</b>	
CITY-ST-ZIP	<b>BEVERLY HILLS FL 34465-3030</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

**Robert H. Owen**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/23/02 352746-6936**  
Date Daytime Phone #

CR2E037 (9/01)

Attachment # C10170

Check No.

2097 - Grand Lodge of  
\$ 1898.75 Florida

31 Lodges  
attached

2002 Uniform Business Report				
No.	Lodge	Date Recd	Amount	Comment
13	Wellborn	03/01/02	\$61.25	
24	Naval	03/01/02	\$61.25	
35	Bradford	03/01/02	\$61.25	
40	Orion	03/01/02	\$61.25	
48	Dade City	03/01/02	\$61.25	
72	Lake	03/01/02	\$61.25	
103	I. N. McNatt	03/01/02	\$61.25	
126	Albert J Russell	03/01/02		<del>no check</del>
127	Clearwater	03/01/02	\$61.25	
136	Dunnellon	03/01/02	\$61.25	
137	High Springs	03/01/02	\$61.25	
138	Harmonia	03/01/02	\$61.25	
142	Parker	03/01/02	\$61.25	
164	Vernon	03/01/02	\$61.25	
172	Alpha	03/01/02	\$61.25	
213	Century	03/01/02	\$61.25	
222	Acme	03/01/02	\$61.25	
234	Tavares	03/01/02	\$61.25	
270	Daytona Beach	03/01/02	\$61.25	
272	Ribault	03/01/02	\$61.25	
276	Bethlehem	03/01/02	\$61.25	
284	Graceville	03/01/02	\$61.25	
314	Harry Jackson	03/01/02	\$61.25	
318	Harbor City	03/01/02	\$61.25	
330	Temple Terrace	03/01/02	\$61.25	
<del>334</del>	<del>Beach</del>	<del>03/01/02</del>	<del>\$61.25</del>	<del></del>
354	Beach	03/01/02	\$61.25	
<del>357</del>	<del>Cape Coral</del>	<del>03/01/02</del>	<del>\$61.25</del>	<del></del>
375	Brotherhood	03/01/02	\$61.25	
378	Springs	03/01/02	\$61.25	
384	Gateway	03/01/02	\$61.25	
388	West Dade	03/01/02		<del>no check</del>
398	Ridge Masonic	03/01/02	\$61.25	

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