2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000006296

FILED Apr 12, 2009 Secretary of State

Entity Name: MASONIC DESCENDANTS OF THE PYRAMIDS, INC.

| Current Principal Place of Business: | | New Principal Place | New Principal Place of Business: | |
|--|--|--|--|--|
| | ERRARY BLVD WEST HILL, FL 33319 | | | |
| Current P | Mailing Address: | New Mailing Address | :: | |
| | ERRARY BLVD WEST HILL, FL 33319 | | | |
| El Numbe | r: FEI Number Applied For | () FEI Number Not Applicable (X) | Certificate of Status Desired () | |
| Name an | d Address of Current Registered Age | nt: Name and Address o | f New Registered Agent: | |
| 3619 INVI | , ERNEST ERRARY BLVD WEST HILL, FL 33319 US | | | |
| | e named entity submits this statement fo te of Florida. | or the purpose of changing its registered | d office or registered agent, or both, | |
| | to of thoriage. | | | |
| SIGNATU | JRE: | | | |
| SIGNATU | | ed Agent | Date | |
| SIGNATU OFFICER | JRE: | | | |
| OFFICER Title: lame: | Electronic Signature of Registers RS AND DIRECTORS: P () Delete MURRAY, ERNEST 3619 INVERRARY BLVD WEST | ADDITIONS/CHANGE | | |
| DFFICER Title: Name: Nddress: City-St-Zip: Title: Name: Nddress: | Electronic Signature of Registers RS AND DIRECTORS: P () Delete MURRAY, ERNEST 3619 INVERRARY BLVD WEST LAUDERHILL, FL 33319 VP () Delete JOHNSON, GEORGE 570 E CAMPUS CIRCLE | ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: | S TO OFFICERS AND DIRECTOR | |
| | Electronic Signature of Registers RS AND DIRECTORS: P () Delete MURRAY, ERNEST 3619 INVERRARY BLVD WEST LAUDERHILL, FL 33319 VP () Delete JOHNSON, GEORGE 570 E CAMPUS CIRCLE FORT LAUDERDALE, FL 33312 S () Delete SPANN, MICKLE 906 NW 24TH AVENUE | ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: | ES TO OFFICERS AND DIRECTOR () Change () Addition | |

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: ERNEST MURRAY P 04/12/2009