## **DOCUMENT # N00773**

FILED Apr 02, 2001 8:00 am

1. Entity Name	•
MASONIC BUILDING CLUB	B. INC.

r. Chary ivan	iie					Secretar	y oi St	ate
MASON	IIC BUILDING CLUB, INC.					04-02-2001 903	•	
Principal Place of Business  1104 WEST JACKSON PENSACOLA FL 32501 US		Mailing Address	Mailing Address					
		2517 NORTH "L" STREET PENSACOLA FL 32505 US :						
					1 (44)		) <b>a</b>	
2. Principal f	Place of Business	3. Mailing Address		وصفوت				
Suite, Apt	Suite, Apt. #, etc.  Suite, Apt. #, etc.				DO NOT WRITE IN	THIS SPACE		
City & State		City & State			4. FEI Number Applied For Not Applied For Not Applied			
Zip	Country	Zip	Zip Country		5 Certificate of Status Decired S8.75 Additional			
	6. Name and Address of Curren	It Registered Agent	<u> </u>			Address of New Regist	Fee Require	ea .
	27 WIIV COMPOSS OF CHILDS		Nan	ne	v gird /	)		
DATE DE	PATE, BERNETT			eet Address (P.	O. Box Number	is Not Acceptable)		
	rnett RTH 'L' ST		-			•		
PENSACO	DLA FL 32505		City	,	<b>₽</b> Zip Code			
			Oity	'			FL   Zip Cod	
FILE NOW: FEE IS \$61.25				Make Check Payable to to Fees Department of State				
10.	OFFICERS AND D	NRECTORS	11.	ΔΓ	DDITIONS/CHA	NGES TO OFFICERS AN	ID DIRECTORS IN	110
TITLE	PD	Delete	TITLE		DD1130110) 01111	100100110011071	☐ Change	Addition
NAME	PATE, BERNETT		NAME					
STREET ADDRESS CITY-ST-ZIP	2517 N "L" ST PENSACOLA FL		STREET ADDR	1500				
TITLE	VD	☐ Delete	TITLE				☐ Change	Addition
NAME Street address	JACKSON, MILDRED		NAME STREET ADDRI	Ecc				
CITY-ST-ZIP	1713 W ROSEANNA ST PENSACOLA FL		CITY-ST-ZIP					
TITLE	SD	☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS	GAINEY, ELLIS		NAME STREET ADDR	500				
CITY-ST-ZIP	3407 W SCOTT ST PENSACOLA FL 32505		CITY-ST-ZIP					
TITLE	T	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	PURIFY, JAMES H.		NAME	500				
STREET ADDRESS CITY-ST-ZIP	1310 GERMAIN PENSACOLA FL		STREET ADORI CITY-ST-ZIP	663				
TITLE	C	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	WEATHERSPOON, JIMMIE		NAME				-	
STREET ADDRESS CITY-ST-ZIP	624 W CHASE ST		STREET ADDRE	ESS				
TITLE	PENSACOLA FL	☐ Delete	TITLE				Change	Addition
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRE	ESS				

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: