

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90490 043 ****61.25

DOCUMENT # N01107

1. Entity Name
BRANFORD SHRINE CLUB ASSOCIATION, INC.



Principal Place of Business
**OLD DEPOT CLUBHOUSE, SUWANNEE RIVER
P.O. BOX 125
BRANFORD FL 32008**

Mailing Address
**OLD DEPOT CLUBHOUSE, SUWANNEE RIVER
P.O. BOX 125
BRANFORD FL 32008**

10005308



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2539067**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ROBARTS, CHARLES W
RT 1 BOX 509
BRANFORD FL 32008**

(TREASURER)

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	DANIEL, CHARLIE	P.O. BOX 824 N/A	BRANFORD FL	<input type="checkbox"/>
S	CARMICHAEL, LEWIE S	RT 1 BOX 401	BRANFORD FL 32008	<input type="checkbox"/>
P	ISAAC, WALLACE W	22812 -39 ST	LAKE CITY FL 32024	<input checked="" type="checkbox"/>
VP	LUNDY, EDGAR	RT 2 BOX 40042	LAKE CITY FL 32024	<input checked="" type="checkbox"/>
D	KEEN, LEONARD KENNET	RT 15 BOX 4428	LAKE CITY FL 32024	<input type="checkbox"/>
D	WATTERS, GEORGE	P.O. BOX 931, NA	BRANFORD FL	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PRESIDENT	VINCENT L. GOCCEK	RT 2 BOX 950 HIGH SPRING	FL 32643	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1ST VP	DENNIS S. JOHNSON	RT 1 BOX 760, BRANFORD, FL	32008	<input type="checkbox"/>	<input type="checkbox"/>

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: _____

(Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-03

386-975-3835

CR2E037 (10/02)