2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000452

Apr 27, 2006 Secretary of State

Entity Name: UNION GRAND COUNCIL ORDER OF THE KNIGHTS OF PYTHAGORAS OF THE STATE OF FLORIDA

AND JURISDICTION, INC.

Current Principal Place of Business: New Principal Place of Business:

1426 AMADOR AVE. N.W. PALM BAY, FL 32907

Current Mailing Address: New Mailing Address:

1426 AMADOR AVE. N.W. PLAM BAY, FL 329076

FEI Number: 59-3622411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GAGUM, DONALD 1426 AMADOR AVE. N.W. PALM BAY, FL 32907 US

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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition DAVIS, RUSSELL STATE D Name: Name: 7004 MAYAPPLE ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: Title: ASD () Delete Title: () Change () Addition GAGUM, DONALD ASST DI Name: Name: Address: 1426 AMADOR AVE. N.W. Address: City-St-Zip: PALM BAY, FL 32907 City-St-Zip: Title: () Delete Title: () Change () Addition THORNTON, ANDRE' Name: Name: Address: P.O. BOX 9263 Address: City-St-Zip: FT. LAUDERDALE, FL 33311 City-St-Zip: Title: ΑD () Delete Title: () Change () Addition Name: LANE, NED AREA DI Name: 2360 SILVERSIDE LOOP Address: Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: Title: () Delete Title: () Change () Addition GAGUM, DONALD TREASUR Name: Name: 1426 AMADOR AVE. N.W. Address: Address: City-St-Zip: PALM BAY, FL 32907 City-St-Zip: Title: () Delete Title: () Change () Addition GILLIS, CLARENCE AREA DI Name: Name: Address: P.O. BOX 9263 Address: FT. LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD GAGUM ASD 04/27/2006