2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005
Secretary of State

DOCUMENT# N02000003550

Entity Name: LANDMARK LODGE #93, F.&A.M. INC.

Current Principal Place of Business:

2401 N. ALBANY AVE
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11651
TAMPA, FL 33680

New Mailing Address:

FEI Number: 04-3671864 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ALLEN, ODELL J JR.
3906 W. WALNUT ST.
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

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:

Title:	D	( ) Delete
Name:	HODGINS, GEORGE	
Address:	3413 E. FERN ST.	
City-St-Zip:	TAMPA, FL 33610	
Title:	D	( ) Delete
Name:	STEPHENS, GREGORY	
Address:	14912 LAKE FOREST DR.	
City-St-Zip:	LUTZ, FL 33549	
Title:	D	( ) Delete
Name:	PLATTS, TOBIAS J	
Address:	1526 E. 139TH AVE.	
City-St-Zip:	TAMPA, FL 33513	
Title:	T	( ) Delete
Name:	HART, LEONARD	
Address:	3303 MCBERRY ST.	
City-St-Zip:	TAMPA, FL 33610	
Title:	S	( ) Delete
Name:	ALLEN, ODELL J JR.	
Address:	3906 WALNUT ST.	
City-St-Zip:	TAMPA, FL 33607	
Title:	PM	( ) Delete
Name:	BATES, JAMES SR.	
Address:	4219 GRACE ST.	
City-St-Zip:	TAMPA, FL 33607	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	ALLEN, ODELL J JR.	
Address:	703 E. VIRGINIA AVE.	
City-St-Zip:	TAMPA, FL 33603	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GREGORY STEPHENS WM 05/03/2005

Electronic Signature of Signing Officer or Director — Date