2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2004 8:00 am
Secretary of State
02-06-2004 90015 037 ****61.25

DOCUMENT # N02000007789

1. Entity Name
JACKSONVILLE SCOTTISH RITE ASSOCIATION, INC.

94010814

Principal Place of Business	Mailing Address
965 HUBBARD ST JACKSONVILLE, FL 32206	965 HUBBARD ST JACKSONVILLE, FL 32206

02022004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0431516
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

YARBOUROUGH, DAVID A
11219 INEZ DR
JACKSONVILLE, FL 32218

DO NOT WRITE IN THIS SPACE

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: David A. Yarbourough FEB. 02, 2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	JAFFE, LAWRENCE L
STREET ADDRESS	5150 BELFORT RD BLDG 300
CITY-ST-ZIP	JACKSONVILLE, FL 32256
TITLE	D
NAME	SHEPPARD, ROY C
STREET ADDRESS	5513 SILKWOOD LN
CITY-ST-ZIP	ORANGE PARK, FL 32073
TITLE	D
NAME	YARBOUROUGH, DAVID A
STREET ADDRESS	11219 INEZ DR
CITY-ST-ZIP	JACKSONVILLE, FL 322189
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: David A. Yarbourough FEB 02, 2004 (904) 355-7633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CORRECTION OF NAME & ADDRESS

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02022004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 51-0431516 ☐ Applied For ☐ Not Applicable

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
YARBOUROUGH, DAVID A 11219 INEZ DR JACKSONVILLE, FL 32218 Name Correction	Name: Yarborough, David A. Street Address (P.O. Box Number is Not Acceptable): 11219 Inez Dr. City: Jacksonville FL Zip Code: 32218

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: David A. Yarborough FEB. 02, 2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
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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	D JAFFE, LAWRENCE L 5150 BELFORT RD BLDG 300 JACKSONVILLE, FL 32256	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHEPPARD, ROY C 5513 SILKWOOD LN ORANGE PARK, FL 32073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YARBOUROUGH, DAVID A 11219 INEZ DR JACKSONVILLE, FL 322189 Correction --->	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Yarborough, David A. 11219 Inez Drive Jacksonville, FL 32218 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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