2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005902

Secretary of State

Entity Name: ILLUSTRIOUS UNION GRAND COUNCIL ROYAL & SELECT MASTERS OF FLORIDA (PHA), INC.

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

410 NORTH BROAD STREET JACKSONVILLE, FL 32202

Current Mailing Address: New Mailing Address:

410 NORTH BROAD STREET JACKSONVILLE, FL 32202

FEI Number: 20-4969622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DANIELS, EARNEST B DANIELS, EARNEST B 1436 BAY HARBOR DRIVE 290 VININGS WAY BLVD 6-305 APT # 105

DESTIN, FL 32541 US PALM HARBOR, FL 34685 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: 02/20/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CEO () Delete (X) Change () Addition DANIELS, EARNEST B DANIELS, EARNEST B Name: Name: 290 VININGS WAY BLVD #6-305 Address: 1436 BAY HARBOR DRIVE APT# 105 Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: PALM HARBOR, FL 34685 Title: () Delete Title: () Change () Addition WRIGHT, HENRY L SR. Name: Name: Address: 1808 EAST OHIO STREET Address: City-St-Zip: PLANT CITY, FL 33566 City-St-Zip:

Title: () Delete Title: () Change () Addition DARGAN, THOMAS D JR. Name: Name:

Address: PO BOX 188 Address: City-St-Zip: SHALIMAR, FL 32579 City-St-Zip:

Title: SEC () Delete Title: () Change () Addition

Name: WILLIAMS, RONALD E SR. Name: 849 SPRING ISLAND WAY Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip:

Title: TRES () Delete Title: () Change () Addition

LOPER, LYNWOOD Name: Name: 5226 VIA HACIENDA CIRCLE APT 215 Address: Address: City-St-Zip: ORLANDO, FL 32859 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: RONALD E. WILLIAMS.SR. SEC 02/20/2007