

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000007411

FILED
Oct 26, 2007
Secretary of State

Entity Name: SUPREME GRAND LODGE, MODERN FREE AND ACCEPTED MASON OF THE WORLD, INC

Current Principal Place of Business:

5260 NW 88TH AVENUE
G-204
FORT LAUDERDALE, 33351

New Principal Place of Business:

5260 NW 88TH AVENUE
G-204
FORT LAUDERDALE, FL 33351

Current Mailing Address:

5260 NW 88TH AVENUE
G-204
FORT LAUDERDALE, 33351

New Mailing Address:

55 NE 192ND ST
MIAMI, FL 33179

FEI Number: 33-1145902 **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:

PENN, JOANNE
5260 NW 88TH AVENUE
G-204
FORT LAUDERDALE, FL 33351 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: PENN JOANNE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PENN, JOANNE
Address: 5260 NW 88TH AVENUE G-204
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: P () Delete
Name: GARDNER, LOUISE
Address: 55 NE 192ND STREET
City-St-Zip: MIAMI, FL 33179

Title: P () Delete
Name: PARKER, DELOIS
Address: 55 NE 192ND STREET
City-St-Zip: MIAMI, FL 33179

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:

I hereby certify that the information supplied with this filing does not qualify 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: DELOIS WEST PARKER

P

10/26/2007

Electronic Signature of Signing Officer or Director

Date