

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007513

FILED  
Apr 15, 2009  
Secretary of State

**Entity Name:** THE CRESTVIEW COMMANDERY NO. 25 KNIGHTS TEMPLAR, INC.

**Current Principal Place of Business:**

404 GARDEN STREET  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1826  
CRESTVIEW, FL 32536

**New Mailing Address:**

**FEI Number:** 23-7157816

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCGUIRE, ROBERT D  
4784 CORONADO CIR  
CRESTVIEW, FL 32539 US

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

WALLACE, ISAAC B  
415 TWIN LAKES LANE  
DESTIN, FL 32541 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: ISAAC B WALLACE

04/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: NORDAL, NEVIN H  
Address: 505 CONE CIRCLE  
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete  
Name: WHITMAN, LESLIE H  
Address: 106 JUDITH AVE  
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete  
Name: WAYNE, JONES T  
Address: 200 TAMARACK AVE  
City-St-Zip: NICEVILLE, FL 32578

Title: SP ( ) Delete  
Name: MCGUIRE, ROBERT D  
Address: 4784 CORONADO CIR  
City-St-Zip: CRESTVIEW, FL 32539

Title: TD ( ) Delete  
Name: WHOBREY, EDDY C SR  
Address: 150 PATCH AVE  
City-St-Zip: CRESTVIEW, FL 32539

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: GRAY, JOHN I  
Address: 6336 HWY 85 N  
City-St-Zip: CRESTVIEW, FL 32536

Title: D (X) Change ( ) Addition  
Name: WHITMAN, LESLIE H  
Address: 1006 JUDITH AVE  
City-St-Zip: NICEVILLE, FL 32578

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SP (X) Change ( ) Addition  
Name: GOBIN, MARION C  
Address: 195 VILLACREST DRIVE  
City-St-Zip: CRESTVIEW, FL 32536

Title: TD (X) Change ( ) Addition  
Name: WALLACE, ISAAC B  
Address: 415 TWIN LAKES LANE  
City-St-Zip: DESTIN, FL 32541

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: WAYNE T JONES

D

04/15/2009

Electronic Signature of Signing Officer or Director

Date