2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2000 8:00 am
Secretary of State
02-04-2000 90034 033 ****61.25

DOCUMENT # N31263

1. Entity Name

LAKE CITY FLORIDA CHAPTER #1872 OF AMERICAN ASSO

Principal Place of Business	Mailing Address
MASONIC HALL 2685 MCFARLANE AVE. LAKE CITY FL 32055 US	ROUTE 9, BOX 1064 LAKE CITY FL 32024-8972 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Rt 12 Box 153 Suite, Apt. #, etc.
City & State	City & State Lake City Fl
Zip / Country	Zip 32025 / Country 8972

4. FEI Number 23-7392227 ☐ 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
MARCHAM, BENITA R.R. 3 BOX 441 LAKE CITY FL 32055	Name MATTIE PAUL Street Address (P.O. Box Number is Not Acceptable) RT. 12 Box 153 City LAKE CITY Fl. 32025 FL / Zip Code

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.

SIGNATURE JEAN P. JONES, SEC. TREAS. Jean P. Jones 1-28-2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MARCHAM, BENITA ROUTE 19 BOX 1464 LAKE CITY FL 32025	☑ Delete	MATTIE PAUL RT. 12 Box 153 LAKE CITY Fl. 32025	☐ Change ☐ Addition PRES.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WRIGHT, ARABELLE 1204 LAKEWOOD CR. LAKE CITY FL 32025 deceased	☑ Delete	JEAN P. JONES Rt. 19 Box 1349 Lake City Fl. 32025	☐ Change ☐ Addition Sec.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HOLT, FRANK RT 4 BOX 576 LAKE CITY FL 32025 deceased	☑ Delete	RUTH SHIRK RT. 14 Box 333 LAKE CITY Fl. 32024	☐ Change ☑ Addition Vice PRES.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BLACKWELL, MARY 203 COUNTRY CLUB RD. LAKE CITY FL	☑ Delete	JEAN P. JONES Rt 19 Box 1349 LAKE CITY Fl. 32025	☐ Change ☐ Addition TREAS.
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BAYLESS, GEORGE ROUTE 9, BOX 382 LAKE CITY FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BAYLESS, PATRICIA ROUTE 9, BOX 382 LAKE CITY FL	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/99)

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: JEAN P. JONES JEAN P. JONES Mattie Paul, Pres. 1-28-2000 904 755-0386
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Sec.-Treas. Date Daytime Phone #