2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N42475

1. Entity Name

UNION TEMPLE ASSOCIATION, INCORPORATED



FILED Jul 10, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

UNION LODGE #47 F&AM PHA. KEY WEST, FL 33040 328 TRUMAN AVENUE KEY WEST, FL 33040



DO NOT WRITE IN THIS SPACE

07032007 No Chg-NP

CR2E037 (4/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THURSTON, BERNARD N JR. 328 TRUMAN AVENUE KEY WEST, FL 33040

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 typed or orinted name of registered agent and site if applicable. (NOTE Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 14, 2007 9. Election Campaign Finance Trust Fund Contribution.			ing 🛮	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FORTSON, JEAN 209 VIRGINIA ST. KEY WEST, FL		<i>U000</i> 00767735 07/10/07-80017-009 61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUS LEGGETT, JOAN ALLEN 20-E 11TH AVENUE KEY WEST, FL 33040				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CASTILLO, AARON 307 VIRGINIA ST. KEY WEST, FL 33040	DO NOT WR			NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-JIP	T WEECH, MARY 211 TRUMAN AVE KEY WEST, FL 33040		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SAWYER, ANTHONY E-6 11TH AVE. KEY WEST, FL			•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THURSTON, BERNARD N JR. 328 TRUMAN AVENUE KEY WEST, FL 33040		· · ·		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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.

CICMATUDE.

Gernard N Thurston In

Date

Daytime Phone #