

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45737

FILED  
May 01, 2006  
Secretary of State

**Entity Name:** SCOTT'S TEMPLE LODGE #404 INTERNATIONAL MASON & EASTERN STARS INC.

**Current Principal Place of Business:**

P.O. BOX 7037  
TALLAHASSEE, FL 32314

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7037  
TALLAHASSEE, FL 32314

**New Mailing Address:**

**FEI Number:** 59-2987173      **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:**

LANIER, HOMER W  
2000 BUSHY HALL ROAD  
TALLAHASSEE, FL 32309      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DT      ( ) Delete  
Name: GODWIN, JAMES  
Address: 522 CAROLINA STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DFS      ( ) Delete  
Name: LANIER, HOMER  
Address: 2000 BUSHY HALL RD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: DPWM      ( ) Delete  
Name: JOHNSON, ANDRE  
Address: 1433 JAKE STREET  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D      ( ) Delete  
Name: LITTLE, LEROY  
Address: 2317 OLIVER STREET  
City-St-Zip: TALLAHASSEE, FL 32310

**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:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: ANDRE JOHNSON

DPWM

05/01/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date