

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90165 043 *****70.00

DOCUMENT # N94000000491 1. Entity Name UNIVERSAL MASONIC BROTHERHOOD, INC.					
Principal Place of Business 1709 N.E. LAMBRIGHT STREET TAMPA, FL 33610			Mailing Address 1709 N.E. LAMBRIGHT STREET TAMPA, FL 33610		
2. Principal Place of Business 1415 N. KINGSWAY RD		3. Mailing Address 1415 N. KINGSWAY RD.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State SEFFNER, FL.		City & State SEFFNER, FL.		4. FEI Number 38-3645098	
Zip 33584		Country HILLS		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33584		Country HILLS		Applied For Not Applicable	
6. Name and Address of Current Registered Agent MCCOLLOUGH, FREDERICK 1709 N.E. LAMBRIGHT STREET TAMPA, FL 33610			7. Name and Address of New Registered Agent Name JUANITA MCCOLLOUGH Street Address (P O Box Number is Not Acceptable) 1415 N. KINGSWAY RD City SEFFNER FL Zip Code 33584		
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> JUANITA MCCOLLOUGH (ST) SIGNATURE _____ <small>Signature typed or printed name of registered agent and title if applicable</small> </div> <div style="width: 30%; text-align: center;"> </div> <div style="width: 30%; text-align: right;"> 3/6/06 <small>DATE</small> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, DOROTHY 4575 FRISCO CIRCLE ORLANDO, FL 32808	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MCCOLLOUGH, JUANITA 1709 N.E. LAMBRIGHT STREET TAMPA, FL 33610	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T Juanita McCollough 1415 N. KINGSWAY RD SEFFNER, FL 33584 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCCOLLOUGH, FREDERICK 1709 N.E. LAMBRIGHT STREET TAMPA, FL 33610	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Frederick A. MCCOLLOUGH 5307 Bogdonoff Dr Seffner, FL 33584 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCCOLLOUGH, FREDERICK A 937 NINA ELIZABETH CIRCLE BRANDON, FL 33511	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V President Gregory Brown 2113 Beach St Tampa, FL 33607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTLER, ERNEST 3101 CHIPCO ST TAMPA, FL 33605	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, GREGORY 2113 BEACH ST TAMPA, FL 33607	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Barbara Lee 1142 Harrison St. Tampa, FL 33602 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing 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 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: Juanita McCollough 3/6/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					