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Mar 31 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000001102 (2)**

1. Corporation Name

**FORT KING DAYLIGHT LODGE NO. 389, INC., FREE AND
ACCEPTED MASONS OF FLORIDA**



Principal Place of Business C/O ROY CONNOR SHEPPARD 220 OCEAN STREET JACKSONVILLE FL 32202	Mailing Address C/O ROY CONNOR SHEPPARD 220 OCEAN STREET JACKSONVILLE FL 32202
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3. Date Incorporated or Qualified 02/17/1994
4. FEI Number 59-3145053
Applied For ☐ Not Applicable

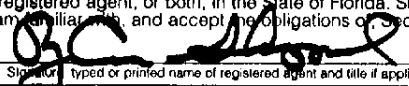
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent SHEPPARD, ROY C 220 OCEAN STREET JACKSONVILLE FL 32202
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number Is Not Acceptable) 83 84 City 85 Zip Code

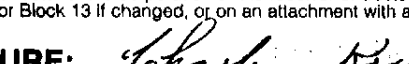
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  DATE **2-13-98**

12. OFFICERS AND DIRECTORS	
TITLE	D ☐ DELETE
NAME	GRABINSKY, ROBERT A
STREET ADDRESS	12123 SE 98 TERR
CITY-ST-ZIP	BELLEVUE FL 34420-5442
TITLE	D ☐ DELETE
NAME	SCHWEM, J. ALEXANDER
STREET ADDRESS	3901 S.W. 7TH AVE.
CITY-ST-ZIP	OCALA FL 34474-6003
TITLE	D ☐ DELETE
NAME	KRUMENACKER, CHARLES R
STREET ADDRESS	8880 SW 27 AVE A-68
CITY-ST-ZIP	OCALA FL 34476-6745
TITLE	TD ☐ DELETE
NAME	MAHLER, LOUIS R
STREET ADDRESS	5 PINE CT DR
CITY-ST-ZIP	OCALA FL 34472-8604
TITLE	SD ☐ DELETE
NAME	GRANT, MARK L JR
STREET ADDRESS	5400 SW 83 PL
CITY-ST-ZIP	OCALA FL 34476-3755
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	WORSHIPFUL MASTER (D) X ☐ Addition
1.2 NAME	Charles Russell Krumenacker
1.3 STREET ADDRESS	8880 SW 27th Ave A-68
1.4 CITY-ST-ZIP	OCALA FL 34476-6745 ☐ Addition
2.1 TITLE	SECRETARY (D) X ☐ Addition
2.2 NAME	Mark Lebaron Grant Jr
2.3 STREET ADDRESS	5400 SW 83rd Pl
2.4 CITY-ST-ZIP	OCALA FL 34476-3755 ☒ Change ☐ Addition
3.1 TITLE	SENIOR WARDEN (D) ☐ Addition
3.2 NAME	George Leroy Sinclair
3.3 STREET ADDRESS	205 N.E. 53rd St
3.4 CITY-ST-ZIP	OCALA FL 34479 ☒ Change ☐ Addition
4.1 TITLE	JUNIOR WARDEN (D) ☐ Addition
4.2 NAME	Carl Buckhannon Cox Sr
4.3 STREET ADDRESS	4340 S.E. 57th Lane ☒ Change ☐ Addition
4.4 CITY-ST-ZIP	OCALA FL 34480-8614
5.1 TITLE	TREASURER (D) ☐ Addition
5.2 NAME	Donald Robert Lippincott
5.3 STREET ADDRESS	4955 S.E. 148th Pl.
5.4 CITY-ST-ZIP	SUMMERFIELD FL 34491-4059

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  DATE: **904-354-2339**
3/5/98

CR2E037 (10/97)