2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400001102

FILED Mar 29, 2009 Secretary of State

Entity Name: FORT KING DAYLIGHT LODGE NO. 389, INC., FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business: New Principal Place of Business: C/O ROY CONNOR SHEPPARD RICHARD E. LYNN 220 OCEAN STREET 220 OCEAN STREET JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 **Current Mailing Address:** New Mailing Address: C/O ROY CONNOR SHEPPARD RICHARD E. LYNN 220 OCEAN STREET 220 OCEAN STREET JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 FEI Number: 59-3145053 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EDWARD, LYNN R LYNN, RICHARD E 220 OCEAN STREET 220 OCEAN STREET JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 US US 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: RICHARD E. LYNN 03/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GRANT, MARK L JR Name: Name: 5400 SW 83RD PL Address: Address: City-St-Zip: OCALA, FL 344763755 City-St-Zip: Title: SWD () Delete Title: WMD (X) Change () Addition PHELPS, RODNEY E Name: PHELPS, RODNEY E Name: Address: 30 TRONAU DR Address: 30 TRONAU DR City-St-Zip: INGLIS, FL 344499113 City-St-Zip: INGLIS, FL 344499113 Title: TD () Delete Title: () Change () Addition HOWARD, TERRY J Name: Name: Address: P.O. BOX 1519 Address: OCKLAWAHA, FL 32179 City-St-Zip: City-St-Zip: Title: () Delete Title: JWD (X) Change () Addition Name: YOUNG, GEORGE R Name: CUMMINGS, MATTHEW L Address: 6229 EAST RECTOR STREET Address: 14850 SE 97TH PLACE City-St-Zip: INVERNESS, FL 344527956 City-St-Zip: OKAWAHA, FL 321794160 Title: JW () Delete Title: SWD (X) Change () Addition SPRIGS, ZACK K SPRINGER, ZACK K Name: Name: 8479 SW 92ND LN 8479 SW 92ND LN Address: Address: City-St-Zip: OCALA, FL 344819632 City-St-Zip: OCALA, FL 344819632

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD E. LYNN GS 03/29/2009