

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003095

FILED
Apr 07, 2009
Secretary of State

Entity Name: TOMBS OF SOLOMON GRAND LODGE #63/BRIGHT MORNING STAR GRAND CHAPTER # 64, INC.

Current Principal Place of Business:

2802 N. PEARL STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

P O BOX 40085
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 59-3244952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OUTIN, LARRANZIA JR
3620 ANTAR RIDGE LANE
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

OUTIN, LORANZIA JR
3620 ANTAR RIDGE LANE
JACKSONVILLE, FL 32218 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: LORANZIA OUTIN, JR.

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SMITH, DAN JR
Address: 2210 FOREST HILLS ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: T () Delete
Name: SPENCER, ROBERTA A
Address: 2637 SAM HOUSTON PLACE
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: OUTIN, LORANZIA JR
Address: 3620 ANTAR RIDGE LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: CC () Delete
Name: WISE, GERALYN
Address: 10211 SWARTHMORE DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: C () Delete
Name: SMITH, SR, JAMES R
Address: 1016 GRUNTHAL ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: DIXON, LARRY
Address: 8968 PALOS VERDE DRIVE
City-St-Zip: ORLANDO, FL 32825

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:

Title: C (X) Change () Addition
Name: POSTELL, LEANDREW
Address: 401 MONUMENT RD #51
City-St-Zip: JACKSONVILLE, FL 32258

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LORANZIA OUTIN, JR.

D

04/07/2009

Electronic Signature of Signing Officer or Director

Date