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Mar 26 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000000836 (5)

1. Corporation Name

EASTERN STAR TEMPLE ASSOCIATION OF JACKSONVILLE,  
INC.



Principal Place of Business

Mailing Address

35 PHELPS ST  
JACKSONVILLE FL 32202

13016 CHAMELEON DR  
JACKSONVILLE FL 32223-1704

3. Date Incorporated or Qualified  
02/20/1995

3a. Date of Last Report  
04/16/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
59-2997116

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRAHAM, BETTY S  
13016 CHAMELEON DRIVE  
JACKSONVILLE FL 32223

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE  
NAME STEELE, KATHY  
STREET ADDRESS 4879 BRIGHTON DR  
CITY-ST-ZIP JACKSONVILLE FL 32217

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME Warkentine Richard A.  
1.3 STREET ADDRESS 10556 Rocky Garden Ln.  
1.4 CITY-ST-ZIP Jacksonville, FL 32217

TITLE VD ☒ DELETE  
NAME WARKENTINE, RICHARD A  
STREET ADDRESS 10556 ROCKY GARDEN LANE  
CITY-ST-ZIP JACKSONVILLE FL 32217

2.1 TITLE VD ☒ Change ☐ Addition  
2.2 NAME Edna Lois Ramsdell  
2.3 STREET ADDRESS 12320 Macaw Drive  
2.4 CITY-ST-ZIP Jacksonville, FL, 32223

TITLE STD ☐ DELETE  
NAME GRAHAM, BETTY S  
STREET ADDRESS 13016 CHAMELEON DR  
CITY-ST-ZIP JACKSONVILLE FL 32223

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Betty S. Graham*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/97

904-268-6922

CR2E037 (9/96)