

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005170

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** YORK RITE MASONIC BODIES OF PENSACOLA FOUNDATION, INC.

**Current Principal Place of Business:**

189 W AIRPORT BLVD  
PENSACOLA, FL 32505 US

**New Principal Place of Business:**

**Current Mailing Address:**

189 W AIRPORT BLVD  
PENSACOLA, FL 32505 US

**New Mailing Address:**

**FEI Number:** 59-3396007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JACOBS, WILLIAM R  
4057 SHERIDAN DR  
PACE, FL 32571 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BRYANT, JOHN H JR.  
Address: 5120 DOGWOOD DR  
City-St-Zip: MILTON, FL 32571 US

Title: VP  
Name: LAROSE, ARTHUR J  
Address: 2646 SHERRILANE DR.  
City-St-Zip: CANTONMENT, FL 32533 US

Title: D  
Name: GAITHER, JOHNNY D  
Address: 5296 SPRING ST  
City-St-Zip: PACE, FL 32571 US

Title: P  
Name: PEREZ, CHARLES  
Address: 7649 NORTHPOINTE DR  
City-St-Zip: PENSACOLA, FL 32514 US

Title: D  
Name: WILLIAMS, BILLY G  
Address: 3374 INDIAN HILLS CIR  
City-St-Zip: PACE, FL 32571 US

Title: D  
Name: PARKS, RONALD L  
Address: 624 WAYNE AVE  
City-St-Zip: PENSACOLA, FL 32507 US

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM R JACOBS

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04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date