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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>N 96 000000 114</i>			
1. Corporation Name <i>INTERNATIONAL MASONS AND ORDER OF EASTERN STARS BUILDING & CHARITABLE ASSOCIATION OF ST. PETERSBURG, INC.</i>			
Principal Place of Business		Mailing Address	
2. Principal Place of Business 21 <i>805 13th Ave. So.</i> Suite, Apt. #, etc. 22 <i>St. Petersburg, FL</i>		2a. Mailing Address 26 <i>3500 28th Ave. So.</i> Suite, Apt. #, etc. 27 <i>St. Petersburg, FL</i>	
23 <i>St. Petersburg, FL</i> 24 <i>33701</i> 25 <i>FL</i>	28 <i>St. Petersburg, FL</i> 29 <i>33711</i> 30 <i>FL</i>	3. Date Incorporated or Qualified 3a. Date of Last Report	
4. FEI Number <i>58-3136728</i>		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 <i>Christine W. Hayes</i> <i>3500 28th Ave. So.</i> <i>St. Petersburg, FL 33711</i>		10. Name and Address of New Registered Agent 81 <i>Christine W. Hayes</i> 82 <i>3500 28th Ave. So.</i> 83 84 <i>St. Petersburg</i> FL 85 <i>33711</i>	
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 <i>Christine W. Hayes</i> 9.30.97 Signature typed or printed name of registered agent and fee, if applicable. (NOT) Registered Agent signature required when reinstating.			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME <i>D. JAMES E KELLY</i> ☐ DELETE STREET ADDRESS <i>850 Newton Ave. So.</i> CITY-ST-ZIP <i>St. Petersburg, FL 33701</i>	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	☐ Change ☐ Addition 700002347507--S -11/14/97--01065--015 *****61.25 *****61.25	
TITLE NAME <i>T. Christine W. Hayes</i> ☐ DELETE STREET ADDRESS <i>3500 28th Ave. So.</i> CITY-ST-ZIP <i>St. Petersburg, FL 33711</i>	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME <i>T. Thelma Davis</i> ☐ DELETE STREET ADDRESS <i>2425 Highland St. So.</i> CITY-ST-ZIP <i>St. Petersburg, FL 33701</i>	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME <i>T. James Turner</i> ☐ DELETE STREET ADDRESS <i>1048 26th Ave. So.</i> CITY-ST-ZIP <i>St. Petersburg, FL 33701</i>	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition	
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: <i>Christine W. Hayes</i> Christine W. Hayes 9.30.97 813 867-1218 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E037 (9/96)