

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90098 005 ****61.25

DOCUMENT # N97000000080

1. Entity Name
LAKE WORTH SCOTTISH RITE HOLDING CORPORATION, INC.



Principal Place of Business
**980 N. FEDERAL HIGHWAY
SUITE 402
BOCA RATON, FL 33432**

Mailing Address
**980 N. FEDERAL HIGHWAY
SUITE 402
BOCA RATON, FL 33432**

60022622



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0774216

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, BILL T JR
980 N. FEDERAL HIGHWAY
SUITE 402
BOCA RATON, FL 33432**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **KING, SYDNEY**
STREET ADDRESS **2111 NW 76TH AVE**
CITY-ST-ZIP **MARGATE, FL 33063**

TITLE **D** ☒ Delete
NAME **MOORE, GERRY M**
STREET ADDRESS **2000 NORTH D STREET**
CITY-ST-ZIP **LAKE WORTH, FL 33460**

TITLE **D** ☐ Delete
NAME **DAVIS, JAMES R**
STREET ADDRESS **6307 WHITE SABAL PALM LANE**
CITY-ST-ZIP **GREENACRES, FL 33463**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME **Menger Jr, Ewell E**
STREET ADDRESS **1747 Haynie Lane**
CITY-ST-ZIP **Jupiter, FL 33478**

TITLE **D** ☒ Change ☐ Addition
NAME **Michael A. Caribbet**
STREET ADDRESS **5126 Saint John Ave N**
CITY-ST-ZIP **Boynton Beach, FL 33437**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/07 (su) 582-6794

Date

Daytime Phone #