

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N97000001313 (2)

1. Corporation Name

MOST WORSHIPFUL PRINCE HALL GRAND ROYAL ARCH CHAPTER OF ROYAL ARCH MASON OF FLORIDA, INC.

Principal Place of Business

Mailing Address

1040 LINCOLN TERRACE
WINTER GARDEN FL 34789

1040 LINCOLN TERRACE
WINTER GARDEN FL 34789

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



3. Date Incorporated or Qualified

03/10/1997

4. FEI Number

\$9-3492679

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. SAME as above

26. SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SAMPSON, JOSEPH L
4437 LINCREST DRIVE, SOUTH
JACKSONVILLE FL 32208

81. Name

Booker T. Coates

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

1040 LINCOLN Ter

83. City

Winter Garden

84. State

FL

85. Zip Code

34789

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

Booker T. Coates

02-23-98

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

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☐ DELETE

☐ DELETE

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

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

P: Booker T. Coates
1040 LINCOLN Ter
Winter Garden FL 34789

V: STEVE REEVES
4744 MAILBELLO BLVD.
ORLANDO, FL 32811

S: Bennie Kegler
6591 Knight Dr
Orlando FL 32818

T: Lafayette Dowdell
3115 Westchester Av
Mt Plymouth, FL 32176

02-23-98

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*****227.50 *****70.00

14. I 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: Booker T. Coates 02-23-98 407-656-7085

CR2E037 (10/97)