

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004801

FILED
Apr 06, 2006
Secretary of State

Entity Name: OCALA SCOTTISH RITE HOLDING CORPORATION

Current Principal Place of Business:

3632 N.E. 7TH ST.
OCALA, FL 344701046

New Principal Place of Business:

Current Mailing Address:

3632 N.E. 7TH ST.
OCALA, FL 344701046

New Mailing Address:

FEI Number: 59-6136216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, PAUL E JR
21 SE WENONA AVE.
OCALA, FL 34471 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: VT () Delete
Name: MURPHEY, MILLEDGE
Address: 1815 NW 7TH PLACE
City-St-Zip: GAINESVILLE, FL 326031222

Title: VT () Delete
Name: WOLFSON, MORTON
Address: 3721 NW 16TH PLACE
City-St-Zip: GAINESVILLE, FL 326054848

Title: STT () Delete
Name: AYRES, BENJAMIN H
Address: 215 ASHLEY COURT
City-St-Zip: OCALA, FL 344718381

Title: RA () Delete
Name: WILSON, PAUL E JR
Address: 21 SE WENONA AVENUE
City-St-Zip: OCALA, FL 34471

Title: T () Delete
Name: GREEN, WILBUR D
Address: P.O. BOX 488
City-St-Zip: SILVER SPRINGS, FL 344890488

Title: PT () Delete
Name: GRANT, MARK L JR
Address: 5400 SW 83RD PLAC E
City-St-Zip: OCALA, FL 344763755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STT (X) Change () Addition
Name: WOLFSON, MORTON
Address: 3721 NW 16TH PLACE
City-St-Zip: GAINESVILLE, FL 326054848

Title: VT (X) Change () Addition
Name: PHILLIPS, GARTH E
Address: P.O. BOX 66
City-St-Zip: LADY LAKE, FL 321580066

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PT (X) Change () Addition
Name: SHOLLENBERGER, RALPH R SR
Address: 19640 SW 57TH PLACE
City-St-Zip: DUNNELLON, FL 344314608

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RALPH R. SHOLLENBERGER, SR.

GS

04/06/2006

Electronic Signature of Signing Officer or Director

Date