

N99000007657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

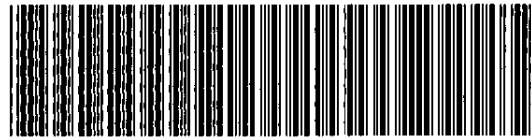
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

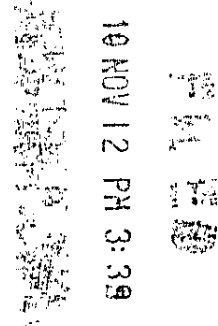
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11/12/10--01025--009 \$35.00



RA Change

11/17/10

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KNIGHTS LODGE #7 FREE AND ACCEPTED MASO
Name of Corporation

DOCUMENT NUMBER: N99000007657

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TONY ANDERSON

Name of Contact Person

KNIGHTS LODGE #7 FREE AND ACCEPTED MASONS

Firm/Company

247 LAGUNA COURT

Address

ST. AUGUSTINE FLORIDA 32086

City/State and Zip Code

andersondata@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TONY ANDERSON

Name of Contact Person

at (904) 794-2086
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corp. KNIGHTS LODGE #7 FREE AND ACCEPTED MASONS THIRTY THIRD AND LAST DEGREE ANCIENT AND ACCEPTED SCOTTISH RITE FREE MASONRY AND ORDER OF EASTERN STAR, INC.
2. The principal office address: 247 LAGUNA COURT ST.AUGUSTINE FL.32086

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/21/1999 Document number: N99000007657

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

WILBER C. ROBERSON SR.

17 ROLLINS AVE.

ST. AUGUSTINE FLORIDA 32095 *(deceased)*

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

WESLEY JAMES

1760 LIGHTSEY RD.

P.O. Box NOT acceptable

ST. AUGUSTINE FLORIDA 32024

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Tony Anderson
Signature of an officer or director

TONY ANDERSON
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Wesley James
Signature of Registered Agent

05 NOV. 2010
Date

If signing on behalf of an entity:

Typed or Printed Name

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)