

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 703869

Entity Name: BETHLEHEM GRAND CHAPTER ORDER OF EASTERN STAR OF FLORIDA AND JURISDICTION, P.H.A.,INC

Current Principal Place of Business:

12919 OAKLAND HILLS COURT
JACKSONVILLE, FL 32225

Current Mailing Address:

P O BOX 41952
JACKSONVILLE, FL 32203 US

FEI Number: 99-3700304

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOOKS, BERNICE L
326 LIDDON PL
LYNN HAVEN, FL 32444 US

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: BERNICE L. HOOKS

07/28/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, CHAIRMAN, GWM
Name SHANNON, ELVERA R
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GWP
Name EDDIE, LA'MICHEAL V
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title VC, GAM
Name WOMBLE, BEATRICE D
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GAP
Name GRAVES, KENT
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, CFO, GT
Name ANDERSON, LAKESHIA M
Address 12919 OAKLAND HILLS COURT
City-State-Zip: JACKSONVILLE FL 32225

Title COO, GS
Name HOOKS, BERNICE L
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title CIO, GAS
Name WALBEY, JANICE G
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GC
Name MATHIS, DENISE S
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

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I hereby 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 all other like empowered.

SIGNATURE: BERNICE HOOKS

COO

07/28/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR, GAC
Name GRAVES-YOUNG, ALICE L
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GCT
Name WASHINGTON, ROBERTA
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR
Name ANDERSON, WILLIE JR.
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GT
Name HOLLAND, BETTY J
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GC
Name REV DR SIMMONS, LIZZIE
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, GT
Name HOOKS, REGINALD B
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203

Title DIRECTOR, PGM
Name GROSS, PORTIA Y.
Address P O BOX 41952
City-State-Zip: JACKSONVILLE FL 32203