

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000005052

**FILED**  
**Feb 21, 2014**  
**Secretary of State**  
**CC5534136404**

**Entity Name:** MOUNT ZION LODGE #4 (I.U.O.M.) INC.

**Current Principal Place of Business:**

1511 TREE RIDGE LANE NE  
A  
PALM BAY, FL 32905

**Current Mailing Address:**

1511 TREE RIDGE LANE NE  
A  
PALM BAY, FL 32905 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SELLMAN, EUCLID  
1511 TREE RIDGE LANE NE  
A  
PALM BAY, FL 32905 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name CARTER, CATHBERT  
Address 1511 TREE RIDGE LANE NE  
A  
City-State-Zip: PALM BAY FL 32905

Title SEC  
Name SELLMAN, EUCLID  
Address 1511 TREE RIDGE LANE NE  
A  
City-State-Zip: PALM BAY FL 32905

Title TREA  
Name HENRY, CLIFFORD  
Address 1511 TREE RIDGE LANE NE  
A  
City-State-Zip: PALM BAY FL 32905

*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:** SELLMAN, EUCLID

SECY

02/21/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date