

**2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N21000011971

**FILED**  
**Sep 13, 2023**  
**Secretary of State**  
**1987060559CR**

**Entity Name:** ST ARTHUR'S #488 MASONIC BENEVOLENT ASSOCIATION  
INCORPORATED

**Current Principal Place of Business:**

680 NW 52ND ST  
MIAMI, FL 33127

**Current Mailing Address:**

680 NW 52ND ST  
MIAMI, FL 33127 US

**FEI Number: 87-3111934**

**Certificate of Status Desired: No**

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

LACEY, TERRY B  
2861 NW 172 TERRACE  
MAIMI GARDENS, FL 33056 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: TERRY LACEY**

**09/13/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LACEY, TERRY B  
Address 2861 NW 172 TERR  
City-State-Zip: MIAMI GARDENS FL 33056

Title S  
Name HINDS, SENECA  
Address 500 NW 99TH WAY  
City-State-Zip: PEMBROKE PINES FL 33024

Title D  
Name DAVIS, GERRY  
Address 3530 SE 4TH ST  
City-State-Zip: HOMESTEAD FL 33033

Title T  
Name MONTAGUE, CRAIG  
Address 655 IVES DAIRY RD #310  
City-State-Zip: MIAMI FL 33179

Title VP  
Name BAKER, ROBERT  
Address 20132 NW 61 AVE  
City-State-Zip: HIALEAH FL 33015

Title D  
Name BURGESS, LONZIE  
Address 2925 SW 133 AVE  
City-State-Zip: MIRAMAR FL 33027

Title D  
Name STAFFORD, CRAID  
Address 1 S PINE ISLAND RD \$1-422  
City-State-Zip: PLANTATION FL 33324

*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: GERRY DAVIS**

**DIRECTOR**

**09/13/2023**

Electronic Signature of Signing Officer/Director Detail

Date