

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 20, 2007**  
**Secretary of State**

DOCUMENT# 729399

**Entity Name:** RABIA TEMPLE NO. 8 ANCIENT EGYPTIAN ARABIC ORDER, NOBLES OF THE MYSTIC SHRINE OF N & SA & J.P.H.A., INC.

**Current Principal Place of Business:**

3707 NORTH LIBERTY STREET  
P.O. BOX 41364  
JACKSONVILLE, FL 322031403

**New Principal Place of Business:**

3707 NORTH LIBERTY STREET  
3707 NORTH LIBERTY STREET  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

3707 NORTH LIBERTY STREET  
P.O. BOX 41364  
JACKSONVILLE, FL 322031403

**New Mailing Address:**

FEI Number: 23-7536446      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BLACKSHEAR, WILLIE W SR  
8914 GREENLEAF RD  
JACKSONVILLE, FL 32208      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: T      ( ) Delete  
Name: YOUNG, MARVIN L  
Address: 11424 MONTEGO BAY DR  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D      ( ) Delete  
Name: MITCHELL, TOMMIE J  
Address: 318 BROWARD RD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: D      ( ) Delete  
Name: STROWBRIDGE, GREGORY M  
Address: 8240 HERLONG RD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D      ( ) Delete  
Name: HORTON, DANNY W  
Address: 9138 CAROLINE RIDGE LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D      ( ) Delete  
Name: RANDOLPH, HERMAN  
Address: 11828 SAGEBRUSH CT  
City-St-Zip: JACKSONVILLE, FL 32218

Title: S      ( ) Delete  
Name: CARTER, JOHN H II  
Address: 3197 LANNIE ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D      (X) Change ( ) Addition  
Name: WILCOX, JESSE L  
Address: 11405 MANATEE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32218

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

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

Title: S      (X) Change ( ) Addition  
Name: HARPER, LOUIS T  
Address: 7469 LAWN TENNIS LANE  
City-St-Zip: JACKSONVILLE, FL 32277

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: JESSE L WILCOX

D

04/20/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date