



STATE OF MICHIGAN CSCL/CD- 2000 - DOMESTIC NONPROFIT & **ECCLESIASTICAL CORPORATION ANNUAL REPORT**

Corporations Division Administrator

FILED

Doc #: 27425845 Filed Date: 8/29/2025

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS NONPROFIT CO Required by Section 911, Act 162, Public Act of 1982:	PROPORATION ANNUAL REPORT			
Corporation Information				
The present name of the corporation is:	MASONIC TEMPLE ASSOCIATION OF SAULT STE. MARIE			
The identification number assigned by the Bureau is:	800875819			
Filing Year	2025			
On behalf of the corporation, I certify that no changes have occurred in required information since the previously filed report.				
The name of the resident agent at the registered office is: PATRICK K. DAVIS Address				
3443 S SEYMOUR ST, SAULT STE. MARIE, MI 49783 Mailing Address				
405 HUDSON DRIVE W, SAULT STE. MARIE, MI 49783				
Purpose The purposes and general nature and kind of business in whethis report:	nich the corporation engaged during the year covered by			

The corporation operates as a charitable and educational nonprofit. Activities include preserving and maintaining the historic Masonic Temple in Sault Ste. Marie, providing affordable space for community organizations and public programs, supporting charitable and educational initiatives in the Eastern Upper Peninsula, and conducting fundraising and outreach for the benefit of the public.

Officers and Directors

Current officers and directors are listed below:

Title	Full Name	Address	
President	ROBERT W LINN	317 CENTRAL AVE SAULT SAINTE MARIE, MI 49783	
Secretary	P. KELLY DAVIS	405 HUDSON DRIVE SAULT STE. MARIE, MI 49783	
Treasurer	P. KELLY DAVIS	405 HUDSON DRIVE SAULT STE. MARIE, MI 49783	
Director	P KELLY DAVIS	3484 S REYNOLDS LN SAULT STE. MARIE, MI 49783	
Director	MATHEW M ZIMMERMAN	6300 E 15 MILE RD BARBEAU, MI 49783	
Director	FRANK V MAROVICH	24548 S FAIRVIEW RD PICKFORD, MI 49774	
Director	ROBERT MARTENS	4521 S RIDGE RD SAULT SAINTE MARIE, MI 49783	

Attestations

\boxtimes	I understand that the information I enter into the online system is public information and will appear online and on copy requests exactly as I enter it into the system.					
×	I have been authorized by the business entity to file this document online.					
×	I, HEREBY SWEAR AND/OR AFFIRM, under penalty of law, including criminal prosecution, that the facts contained in this document are true. I certify that I am signing this document as the person(s) whose signature is required, or as an agent of the person(s) whose signature is required, who has authorized me to place his/her signature on this document.					
Signat	ture(s)					
Self		Robert w. Linn	08/29/2025			
Sign	er's Capacity	Sign Here	Date			