

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Feb 27, 2009  
Secretary of State

DOCUMENT# C10021

Entity Name: HAINES CITY LODGE NO. 219 FREE AND ACCEPTED MASONS OF FLORIDA

## Current Principal Place of Business:

ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

RICHARD E. LYNN  
220 OCEAN ST  
JACKSONVILLE, FL 32202

## Current Mailing Address:

ROY CONNOR SHEPPARD  
220 OCEAN ST  
JACKSONVILLE, FL 32202

## New Mailing Address:

RICHARD E. LYNN  
220 OCEAN ST  
JACKSONVILLE, FL 32202

FEI Number: 23-7526466

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDWARD, LYNN R  
220 OCEAN STREET  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

LYNN, RICHARD E  
220 OCEAN STREET  
JACKSONVILLE, FL 32202 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: RICHARD E. LYNN

02/27/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: SWD ( ) Delete  
Name: PORTER, THOMAS L  
Address: 117 N 18TH ST  
City-St-Zip: HAINES CITY, FL 338444803

Title: T ( ) Delete  
Name: ELLISON RACHEL, JAMES  
Address: 1020 KENTUCKY ST  
City-St-Zip: HAINES CITY, FL 338442600

Title: D ( ) Delete  
Name: ALLEN SMITH, LEONARD J  
Address: 423 JEREMY DRI  
City-St-Zip: DAVENPORT, FL 338379366

Title: JWD ( ) Delete  
Name: JONES, DELBERT E  
Address: 4202 POLK CITY RD  
City-St-Zip: HAINES CITY, FL 338448115

Title: D ( ) Delete  
Name: LEACH, THOMAS C  
Address: 1701 COMMERRCE AVE. #7  
City-St-Zip: HAINES CITY, FL 33844

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: WMD (X) Change ( ) Addition  
Name: PORTER, THOMAS L  
Address: 117 N 18TH ST  
City-St-Zip: HAINES CITY, FL 338444803

Title: TD (X) Change ( ) Addition  
Name: RACHEL, JAMES E  
Address: 1020 KENTUCKY ST  
City-St-Zip: HAINES CITY, FL 338442600

Title: SD (X) Change ( ) Addition  
Name: S,OTJ, LEONARD A  
Address: 47 N 6TH STREET  
City-St-Zip: HAINES CITY, FL 338444205

Title: JWD (X) Change ( ) Addition  
Name: LATIMER, ROBERT J  
Address: P. O. BOX 306  
City-St-Zip: LAKE HAMILTON, FL 338510306

Title: SWD (X) Change ( ) Addition  
Name: CALZADA, JOSE E  
Address: 37 WESTRIDGE ROAD  
City-St-Zip: DAVENPORT, FL 338379747

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD E. LYNN

GS

02/27/2009

Electronic Signature of Signing Officer or Director

Date