

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10094

FILED
Feb 07, 2009
Secretary of State

Entity Name: TROPICAL LODGE NO. 56 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

C/O 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:

C/O ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE, FL 32202

New Mailing Address:

P. O. BOX 1020
220 OCEAN ST.
JACKSONVILLE, FL 32201

FEI Number: 59-1385498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, RICHARD EDWARD
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

02/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: THRASHER, BARRY PAUL
Address: P.O. BOX 468
City-St-Zip: BOKEELIA, FL 339220468

Title: D () Delete
Name: BISSELL, SAMUEL THOMAS
Address: P.O. BOX 696
City-St-Zip: ALVA, FL 339200696

Title: T () Delete
Name: CONNALLY, GERALD EDWARD
Address: 1920 VIRGINIA AVE., 901
City-St-Zip: FORT MYERS, FL 339012317

Title: S () Delete
Name: FRIEDEN, RONALD GEORGE
Address: 7025 E FOUNTAINHEAD RD
City-St-Zip: FORT MYERS, FL 339196805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SWD (X) Change () Addition
Name: SPRADLING, ERNEST R
Address: 407 GRENIER DRIVE
City-St-Zip: NORTH FT MYERS, FL 33903

Title: WMD (X) Change () Addition
Name: BISSELL, SAMUEL T
Address: P.O. BOX 696
City-St-Zip: ALVA, FL 33920

Title: TD (X) Change () Addition
Name: CONNALLY, GERALD E
Address: 1920 VIRGINIA AVE., 901
City-St-Zip: FORT MYERS, FL 339012317

Title: SD (X) Change () Addition
Name: FRIEDEN, RONALD G
Address: 3100 EVANS AVENUE
City-St-Zip: FORT MYERS, FL 33901

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

02/07/2009

Electronic Signature of Signing Officer or Director

Date