

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001578

Entity Name: HAWTHORNE LODGE NO. 103, INC., FREE AND ACCEPTED
MASONS OF FLORIDA**Current Principal Place of Business:**6700 SE 221ST STREET
HAWTHORNE, FL 32640**Current Mailing Address:**6700 SE 221ST STREET
HAWTHORNE, FL 32640**FEI Number: 59-1979470****Certificate of Status Desired: No****Name and Address of Current 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title DIRECTOR
Name SURRENCY, RONALD D
Address 200 N/E FIRST STREET
City-State-Zip: GAINESVILLE FL 32601Title SECRETARY
Name BLAND, MICHAEL F
Address 4711 N/E 7TH STREET
City-State-Zip: OCALA FL 34470Title PRESIDENT
Name GOAD, JERRY D
Address P. O. BOX 423
City-State-Zip: HAWTHORNE FL 32640Title DIRECTOR
Name GILLIAM, RONALD C
Address 5304 N/E 211TH DRIVE
City-State-Zip: EARLTON FL 32631Title TREASURER
Name MITCHELL, STEVE
Address 828 N/E 51ST AVENUE
City-State-Zip: OCALA FL 34470

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: MICHAEL A BLAND**SECRETARY****02/09/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date