## **2018 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10021

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

OF FLORIDA

FILED
Apr 06, 2018
Secretary of State
CC0709983986

## **Current Principal Place of Business:**

RICHARD E. LYNN 220 OCEAN ST JACKSONVILLE, FL 32202

## **Current Mailing Address:**

RICHARD E. LYNN 220 OCEAN ST JACKSONVILLE, FL 32202

FEI Number: 23-7526466 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 SECRETARY Title DIRECTOR

Name HOWLAND, ROBERT A Name WILSON, PAUL S

Address P. O. BOX 52 Address 3131 COUNTRY ROAD 547

City-State-Zip: LAKE HAMILTON FL 33851 City-State-Zip: DAVENPORT FL 33837

Title DIRECTOR Title TREASURER

NameADAMS, LARON RNameALDRIDGE, RUSSELL RAddress147 TRACY CIRAddress28 NOTTINGHAM WAY

City-State-Zip: HAINES CITY FL 33844 City-State-Zip: HAINES CITY FL 33844-9715

Title PRESIDENT

Name BARWICK, MATTHEW M
Address 703 LAKE ELOISE PL

City-State-Zip: WINTER HAVEN FL 33884-3410

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: ROBERT A. HOWLAND

**SECRETARY** 

04/06/2018