

**2019 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10038

**Entity Name:** SEBRING LODGE NO. 249 FREE AND ACCEPTED MASONS OF FLORIDA**FILED**  
**Jan 22, 2019**  
**Secretary of State**  
**7473702158CC****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: 59-1651185****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LYNN, RICHARD  
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 WORSHIPFUL MASTER, PRESIDENT  
Name PRITT, BERMON E. JR.  
Address 2258 WOODS AND WATER CT  
City-State-Zip: SEBRING FL 33872-9225Title TREASURER  
Name WAMPLER, CALVIN H JR.  
Address 5111 ROANOKE STREET  
City-State-Zip: SEBRING FL 33876Title JUNIOR WARDEN  
Name WALTON, DUANE P  
Address 6504 HANCOCK ROAD  
City-State-Zip: SEBRING FL 33870Title SECRETARY  
Name WILLETT, HARRY B III  
Address 322 W. PEABODY CIRCLE  
City-State-Zip: AVON PARK FL 33825Title DIRECTOR  
Name WATSON, TED F  
Address 6385 STILL CT  
City-State-Zip: ZOLFO SPRINGS FL 33890

*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: HARRY B. WILLETT****SECRETARY****01/22/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date