

2015 NOT FOR PROFIT REGISTRATION ANNUAL REPORT

DOCUMENT# C10038

Entity Name: SEBRING LODGE NO. 249 FREE AND ACCEPTED MASONS OF FLORIDA**FILED**
Mar 10, 2015
Secretary of State
CC5377318571**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 SECRETARY
Name DEVANY, JOHN F
Address P.O. BOX 14
City-State-Zip: SEBRING FL 33871Title TREASURER
Name WAMPLER, CALVIN H JR.
Address 5111 ROANIKE STREET
City-State-Zip: SEBRING FL 33876Title DIRECTOR
Name MILLER, DANIEL
Address 3000 WEST EXETER ROAD
City-State-Zip: AVON PARK FL 33825Title PRESIDENT
Name EPLING, STANLEY T II
Address 6327 CAMBRIDGE DRIVE
City-State-Zip: SEBRING FL 33876Title DIRECTOR
Name WATSON, TED F
Address 4523 SEBRING AVE
City-State-Zip: SEBRING FL 33875

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: JOHN DEVANY**SECRETARY****03/10/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date