

**2018 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10051

**FILED  
Apr 06, 2018  
Secretary of State  
CC7989436879**

**Entity Name:** BEAVER CREEK LODGE NO. 230 FREE AND ACCEPTED  
MASONS OF FLORIDA

**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: 23-7526474**

**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           WARD, RANDELL G JR  
Address        8324 HWY 189 N  
City-State-Zip: BAKER FL 32531

Title           TREASURER  
Name           LANOUE, DAVID F  
Address        974 LIGHTHOUSE CHURCH RD  
City-State-Zip: HOLT FL 32564

Title           SECRETARY  
Name           BOYETT, GREGORY D  
Address        88 DANIEL JOHNSON RD  
City-State-Zip: BAKER FL 32531-7706

Title           PRESIDENT  
Name           GRAY, JOHN I  
Address        6335 HWY 85N  
City-State-Zip: CRESTVIEW FL 32536

Title           DIRECTOR  
Name           WHOBREY , EDDY C SR.  
Address        150 PATCH AVE  
City-State-Zip: CRESTVIEW FL 32539-2205

*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: GREGORY D. BOYETT**

**SECRETARY**

**04/06/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date