

**2020 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10095

**FILED**  
**Jan 19, 2020**  
**Secretary of State**  
**3153451665CC**

**Entity Name:** HARMONIA LODGE NO. 138 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 US

**FEI Number: 59-0255592**

**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           TREASURER  
Name           JOHNSON, JOSHUA G  
Address        707 SUNNY PINE WAY APT E-1  
City-State-Zip: GREENACRES FL 33415

Title           SECRETARY  
Name           REILLY, DAVID J  
Address        1896 PALM BEACH LAKES BLVD  
City-State-Zip: WEST PALM BEACH FL 33407

Title           DIRECTOR  
Name           CRUZ, SOTELO P  
Address        9602 FOXTROT LN  
City-State-Zip: BOCA RATON FL 33495

Title           VP  
Name           PRICE, BRIAN M  
Address        5261 BOLERO CIR  
City-State-Zip: DELRAY BEACH FL 33484

Title           PRESIDENT  
Name           RIOS, RAY  
Address        3708 TURTLE ISLAND CT  
City-State-Zip: WEST PALM BEACH FL 33411

*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: DAVID J. REILLY**

**SECRETARY**

**01/19/2020**

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

\_\_\_\_\_  
Date