

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10071

FILED
Feb 14, 2009
Secretary of State

Entity Name: ANCHOR LODGE NO. 182 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202 US

Current Mailing Address:

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US

New Mailing Address:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202 US

FEI Number: 23-7193179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, RICHARD EDWARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOODS, JUSTIN W
Address: 3536 NORTHSIDE CT
City-St-Zip: KEY WEST, FL 330404213

Title: SD () Delete
Name: WALTER WAITE, CHARLES
Address: 929 A TRUMAN AVE
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: BAEDER, LARRY C
Address: 3655 SEASIDE DR.
City-St-Zip: KEY WEST, FL 330405353

Title: T () Delete
Name: ANSELL II, CHARLES W
Address: 2809 FLAGLER AVE
City-St-Zip: KEY WEST, FL 33040

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SWD (X) Change () Addition
Name: TRUHAN, MICHAEL W
Address: 1209 BAY STREET
City-St-Zip: KEY WEST, FL 330403603

Title: SD (X) Change () Addition
Name: WAITE, CHARLES W
Address: P. O. BOX 2370
City-St-Zip: KEY WEST, FL 330452370

Title: WMD (X) Change () Addition
Name: BAEDER, LARRY C
Address: 3655 SEASIDE DR.
City-St-Zip: KEY WEST, FL 330405353

Title: T (X) Change () Addition
Name: ANSELL II, CHARLES W II
Address: 2809 FLAGLER AVE
City-St-Zip: KEY WEST, FL 33040

Title: JWD () Change (X) Addition
Name: ROBBINS, DONALD B
Address: P. O. BOX 6631
City-St-Zip: KEY WEST, FL 330416631

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD E. LYNN

GS

02/14/2009

Electronic Signature of Signing Officer or Director

Date