

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# C10072

**FILED**  
**Mar 06, 2011**  
**Secretary of State**

**Entity Name:** UNIVERSAL LODGE NO. 178 FREE AND ACCEPTED MASONS OF FLORIDA

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 23-7526446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LYNN, RICHARD E  
220 OCEAN STREET  
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: SD  
Name: GORDILLO, FELIX JR  
Address: 807 W WOOLAWN AVE  
City-St-Zip: TAMPA, FL 336035437

Title: WMD  
Name: IZQUIERDO, TOMAS  
Address: 8716 TAHITI LANE  
City-St-Zip: TAMPA, FL 336154427

Title: SWD  
Name: PINTO, RAUL O  
Address: 7754 BRETTONWOOD DRIVE  
City-St-Zip: TAMP, FL 336151348

Title: TD  
Name: PEREZ, BASILIO  
Address: 6207 HAROLD AVENUE  
City-St-Zip: TAMP, FL 336162308

Title: JWD  
Name: TAMAYO, MARIO J  
Address: 8722 OSASE DRIVE  
City-St-Zip: TAMPA, FL 336341004

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: RICHARD E. LYNN

GS

03/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date