

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10079

FILED
Feb 21, 2010
Secretary of State

Entity Name: DEFUNIAK LODGE NO. 170 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 51-0212785 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LYNN, RICHARD E
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: TD
Name: GATES, JOSEPH A
Address: 1286 BRUSH END CIRCLE
City-St-Zip: FREEPORT, FL 32439

Title: WMD
Name: WHITE, JOHN D
Address: 100 MOSLEY ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: SWD
Name: PARSON, TONY L JR
Address: 2651 TONY PARSON LANE
City-St-Zip: PONCE DE LEON, FL 32455

Title: JWD
Name: WILLOUGHBY, WILEY M
Address: 597 TWIN LAKE DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: SD
Name: BROWN, FREDERICK M
Address: 862 W SPRUCE ST
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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

02/21/2010

Electronic Signature of Signing Officer or Director

_____ Date