

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10079

**FILED**  
**Mar 06, 2011**  
**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: HERRING, ROY R  
Address: 2192 BROWN ROAD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: SD  
Name: WHITE, JOHN D  
Address: P. O. BOX 585  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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

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

Title: JWD  
Name: ALFORD, DON G  
Address: 1712 CASWELL ROAD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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