

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10087

FILED  
Feb 07, 2012  
Secretary of State

**Entity Name:** SANFORD LODGE NO. 62 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:**

P. O. BOX 1020  
220 OCEAN ST  
JACKSONVILLE, FL 32201 US

**New Mailing Address:**

**FEI Number:** 23-7168478

**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: SWD  
Name: BOWERS, JOHN M III  
Address: 408 SABASTIAN PRADO  
City-St-Zip: ALTAMONTE SPRINGS, FL 327142235

Title: SD  
Name: JEHAN, HENRY I JR  
Address: P. O. BOX 1662  
City-St-Zip: SANFORD, FL 327721662

Title: TD  
Name: HAMER, JOHN C  
Address: 2176 ALAQUA DRIVE  
City-St-Zip: LONGWOOD, FL 32779

Title: WMD  
Name: SCHMITT, SPENCER J  
Address: 520 N. LACY CIRCLE  
City-St-Zip: DELTONA, FL 327258180

Title: JWD  
Name: ORTIZ, EDGAR E  
Address: OLD WINTERGARDEN RIAD  
City-St-Zip: ORLANDO, FL 32811

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

02/07/2012

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

\_\_\_\_\_  
Date