

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10101

FILED
Mar 07, 2009
Secretary of State

Entity Name: ORANGE BLOSSOM LODGE NO. 80 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

C/O ROY CONNER SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202

New Principal Place of Business:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202

Current Mailing Address:

C/O ROY CONNER SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202

New Mailing Address:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202

FEI Number: 59-3308854

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: SW () Delete
Name: WALTER DAVIS, JAMES
Address: 524 CANTERBURY LANE
City-St-Zip: KISSIMMEE, FL 347416124

Title: JW () Delete
Name: LOKKEN, MITCHELL L
Address: 5019 HOOK HOLLOW CIR
City-St-Zip: ORLANDO, FL 328374908

Title: D () Delete
Name: SHAW, BRAIN M
Address: 245 SUNSET CT
City-St-Zip: DAVENPORT, FL 338375711

Title: SD () Delete
Name: CUNNINGHAM, ROBERT T SR
Address: 287 INDIAN PT CIR
City-St-Zip: KISSIMMEE, FL 34746

Title: T () Delete
Name: FISHER, PATRICK M
Address: 1533 HICKORYWOOD CIR
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: WMD (X) Change () Addition
Name: DAVIS, JAMES W
Address: 524 CANTERBURY LANE
City-St-Zip: KISSIMMEE, FL 347416124

Title: SWD (X) Change () Addition
Name: LOKKEN, MITCHELL L
Address: 5019 HOOK HOLLOW CIR
City-St-Zip: ORLANDO, FL 328374908

Title: JWD (X) Change () Addition
Name: JUNECKO, ROBERT S
Address: 329 ROBBINS REST CIRCLE
City-St-Zip: DAVENPORT, FL 338965207

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: FISHER, PATRICK M
Address: 1533 HICKORYWOOD CIR
City-St-Zip: KISSIMMEE, FL 34744

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

03/07/2009

Electronic Signature of Signing Officer or Director

Date