

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10115

FILED
Feb 07, 2009
Secretary of State

Entity Name: OLIN S. WRIGHT LODGE NO. 79 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

C/O ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSSONVILLE, FL 32202

New Principal Place of Business:

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

Current Mailing Address:

C/O ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSSONVILLE, FL 32202

New Mailing Address:

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

FEI Number: 23-7526377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, RICHARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

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: RICHARD E. LYNN

02/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RUDOLPH, CLARENCE F IV
Address: P O BOX 292595
City-St-Zip: TAMPA, FL 33687

Title: D/JW () Delete
Name: HARDEN, JAMES
Address: 6418 VARN RD
City-St-Zip: PLANT CITY, FL 335657378

Title: D () Delete
Name: MITTONG, LOUIS K II
Address: 516 VALENCIA PARK DR
City-St-Zip: SEFFNER, FL 335845494

Title: T () Delete
Name: FORD, JAMES
Address: 2206 PARKWOOD DR
City-St-Zip: VALRICO, FL 335945426

Title: S () Delete
Name: MAY, ROBERT A
Address: P O BOX 1539
City-St-Zip: PLANT CITY, FL 33564

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: WMD (X) Change () Addition
Name: RUDOLPH, CLARENCE F IV
Address: P O BOX 292595
City-St-Zip: TAMPA, FL 33687

Title: SWD (X) Change () Addition
Name: HARDEN, JAMES G
Address: 6418 VARN RD
City-St-Zip: PLANT CITY, FL 335657378

Title: JWD (X) Change () Addition
Name: CORTEZ, OMAR
Address: 1604 E LEE VILLA DRIVE
City-St-Zip: PLANT CITY, FL 335633964

Title: TD (X) Change () Addition
Name: POWELL, ROBERT W II
Address: 2916 BARRET AVENUE
City-St-Zip: PLANT CITY, FL 335669576

Title: SD (X) Change () Addition
Name: FORD, JAMES W
Address: P O BOX 1539
City-St-Zip: PLANT CITY, FL 33564

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

02/07/2009

Electronic Signature of Signing Officer or Director

Date