

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10123

FILED
Feb 07, 2009
Secretary of State

Entity Name: CURFEW LODGE NO. 73 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

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

Current Mailing Address:

ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202 US

New Mailing Address:

P. O. BOX 1020
JACKSONVILLE, FL 32201 US

FEI Number: 23-7526373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARD, LYNN
220 OCEAN STREET
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

LYNN, RICHARD E
220 OCEAN STREET
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: WMD () Delete
Name: MUELLER, GARY E
Address: PO BOX 482
City-St-Zip: LANARK VILLAGE, FL 323230482

Title: SWD () Delete
Name: DIETZ, ROBERT C
Address: 171 CARL KING AVE
City-St-Zip: CARRABELLE, FL 323222199

Title: D () Delete
Name: JACKSON, DAVID E
Address: PO BOX 522
City-St-Zip: CARRABELLE, FL 323220522

Title: TD () Delete
Name: SKIPPER, GARY W
Address: P.O. BOX 468 N/A
City-St-Zip: CARRABELLE, FL 32322

Title: SD () Delete
Name: PHILLIPS, JAMES B
Address: P.O. BOX 391
City-St-Zip: CARRABELLE, FL 323220391

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SWD (X) Change () Addition
Name: MUELLER, GARY E
Address: PO BOX 482
City-St-Zip: LANARK VILLAGE, FL 323230482

Title: WMD (X) Change () Addition
Name: DIETZ, ROBERT C
Address: 171 CARL KING AVE
City-St-Zip: CARRABELLE, FL 323222199

Title: JWD (X) Change () Addition
Name: JACKSON, DAVID E
Address: PO BOX 522
City-St-Zip: CARRABELLE, FL 323220522

Title: TD (X) Change () Addition
Name: SKIPPER, GARY W
Address: P.O. BOX 468
City-St-Zip: CARRABELLE, FL 32322

Title: SD (X) Change () Addition
Name: PHILLIPS, JAMES B
Address: P.O. BOX 3820
City-St-Zip: CARRABELLE, FL 323220391

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