2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2010
Secretary of State

DOCUMENT# C10123

Entity Name: CURFEW LODGE NO. 73 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
JACKSONVILLE, FL 32201 US

New Mailing Address:

FEI Number: 23-7526373 **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: WMD
Name: HORVATH, MICHAEL L
Address: 1014 TALLAHASSEE ST.
City-St-Zip: CARRABELLE, FL 32322

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

Title: JWD
Name: GUIDRY, MICHAEL T
Address: P. O. BOX 874
City-St-Zip: EAST POINT, FL 323280874

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

Title: SD
Name: PHILLIPS, JAMES B
Address: P.O. BOX 820
City-St-Zip: CARRABELLE, FL 323220820

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 02/06/2010
Electronic Signature of Signing Officer or Director Date