## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# C10125

FILED Feb 14, 2009 Secretary of State

Entity Name: LAWTEY LODGE NO. 189 FREE AND ACCEPTED MASONS OF FLORIDA

**Current Principal Place of Business: New Principal Place of Business:** C/O ROY CONNOR SHEPPARD RICHARD E. LYNN 220 OCEAN ST. 220 OCEAN ST. JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 **Current Mailing Address:** New Mailing Address: C/O ROY CONNOR SHEPPARD RICHARD E. LYNN 220 OCEAN ST 220 OCEAN ST. JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 FEI Number: 23-7526450 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: LYNN, EDWARD LYNN, RICHARD E 220 OCEAN ST 220 OCEAN ST JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 US 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 02/14/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LINGOLD, JAMES B Name: Name: 8297 NW COUNTY ROAD 225 Address: Address: City-St-Zip: STARKE, FL 320915056 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition REHBERG, ROBERT W Name: REHBERG, ROBERT W Name: Address: 8730 NW 196TH ST Address: 8730 NW 196TH ST City-St-Zip: STARKE, FL 320915435 City-St-Zip: STARKE, FL 320915435 Title: () Delete Title: JWD (X) Change ( ) Addition WELLHAUSEN, GARY G KIRLEY, BERNARD E Name: Name: 211600 NW 41ST AVENUE Address: 328 N ST Address: City-St-Zip: JACKSONVILLE, FL 322343018 City-St-Zip: LAWTEY, FL 320583614 Title: () Delete Title: JWD (X) Change ( ) Addition Name: WEILAND, ROY L ST Name: WEILAND, ROY L SR 5881 NW COUNTY ROAD 125 5881 NW COUNTY RD 125 Address: Address: City-St-Zip: LAWTEY, FL 32058 City-St-Zip: LAWTEY, FL 320582749 Title: () Delete Title: SWD (X) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

ROSADO, JOHN S

23184 NW 29TH AVE

LAWTEY, FL 320583742

SIGNATURE: RICHARD E. LYNN GS 02/14/2009

ROSADO, JOHN S

23184 NW 29TH AVE

LAWTEY, FL 320583742

Name:

Address:

City-St-Zip: