

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10137

FILED
Feb 21, 2010
Secretary of State

Entity Name: PONCE DE LEON LODGE NO. 157 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 23-7526433

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: SWD
Name: RAY, WALTER L
Address: 9613 STATE HWY 81
City-St-Zip: PONCE DE LEON, FL 32455

Title: WMD
Name: RHODES, ROY W
Address: 926 N 1ST STREET
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: JWD
Name: MORRIS, BILLY J
Address: 2687 STATE HWY 8
City-St-Zip: PONCE DE LEON, FL 32455

Title: SD
Name: WARD, HERTIS P
Address: 2966 COUNTY HWY., 181-C
City-St-Zip: PONCE DE LEON, FL 324552802

Title: TD
Name: BYRD, ARCHIE D
Address: 2822 OLD MILL ROAD
City-St-Zip: PONCE DE LEON, FL 32455

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

02/21/2010

Electronic Signature of Signing Officer or Director

Date