2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2010
Secretary of State

DOCUMENT# C10146

Entity Name: PORT ST. JOE LODGE NO. 111 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: 59-1839342 **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: TAYLOR, MARLEN E
Address: 1004 GARRISON AVENUE
City-St-Zip: PORT SAINT JOE, FL 32456

Title: SD
Name: MCFARLAND, PERRY J
Address: P.O. BOX 111
City-St-Zip: PORT SAINT JOE, FL 324570111

Title: SWD
Name: BURKETT, RICHARD L
Address: 1804 GARRLSON AVENUE
City-St-Zip: PORT SAINT JOE, FL 32456

Title: JWD
Name: FROST, JAY B
Address: 2950 W. HWY 98
City-St-Zip: PORT SAINT JOE, FL 32456

Title: TD
Name: JONES, KEITH L
Address: 113 CABELL DRIVE
City-St-Zip: PORT SAINT JOE, FL 32456

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 02/14/2010

Electronic Signature of Signing Officer or Director — Date