2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2011
Secretary of State

DOCUMENT# C10152

Entity Name: ASHMORE LODGE NO. 102 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:

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

New Mailing Address:

FEI Number: 23-7526398 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYNN, RICHARD E
220 OCEAN ST
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: JWD
Name: STEPHENS, WILLIAM
Address: PO BOX 266
City-St-Zip: SOPCHOPPY, FL 323580266

Title: WMD
Name: MCMULLEN, EPHRIN W
Address: 2740 SPRING CREEK HWY
City-St-Zip: CRAWFORDVILLE, FL 323274305

Title: SWD
Name: RODDENBERRY, WILLIAM W
Address: P. O. BOX 464
City-St-Zip: SOPCHOPPY, FL 323580464

Title: SD
Name: PIGOTT, PAUL V
Address: P. O. BOX 101
City-St-Zip: SOPCHOPPY, FL 323580101

Title: TD
Name: ROBERTS, ANDREW L
Address: 35 GIBSON RD
City-St-Zip: SOPCHOPPY, FL 323581730

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 03/05/2011

Electronic Signature of Signing Officer or Director Date