2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10167

FILED Mar 07, 2009 Secretary of State

Entity Name: DADE LODGE NO. 14 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 US JACKSONVILLE, FL 32202 US

Current Mailing Address: New Mailing Address:

C/O ROY CONNOR SHEPPARD
220 OCEAN ST.
220 OCEAN ST.

JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 US

FEI Number: 23-7109183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LYNN, RICHARD EDWARD
220 OCEAN ST
220 OCEAN ST

JACKSONVILLE, FL 32202 US JACKSONVILLE, FL 32202 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 03/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: T ()Delete Title: TD (X)Change ()Addition

 Name:
 ESTENOZ, ANTONIO III
 Name:
 ESTENOZ, ANTONIO III

 Address:
 2508 FLAGLER AVE
 Address:
 2508 FLAGLER AVE

 City-St-Zip:
 KEY WEST, FL 330403935
 City-St-Zip:
 KEY WEST, FL 330403935

Title: D () Delete Title: SD (X) Change () Addition

 Name:
 ZEH, DAVID D
 Name:
 ZEH, DAVID D

 Address:
 PO BOX 4068
 Address:
 PO BOX 4068

City-St-Zip: KEY WEST, FL 330455143 City-St-Zip: KEY WEST, FL 330455143

Title: SWD. () Delete Title: SWD. (X) Change () Addition SIMEON, STEVEN L ACEVEDO, RANDALL W SR Name: Name: 1115 17TH TERRACE Address: 1106 PETRONIA ST Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: () Delete Title: WMD () Change (X) Addition

 Name:
 Name:
 CONDELLA, RYAN C

 Address:
 Address:
 A 14 7TH AVENUE

 City-St-Zip:
 City-St-Zip:
 KEY WEST, FL 330405862

Title: () Delete Title: JWD () Change (X) Addition

Name: Name: HOLMES, STEVEN W

Address: Address: A324

City-St-Zip: City-St-Zip: KEY WEST, FL 33040

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.

SIGNATURE: RICHARD E. LYNN GS 03/07/2009