

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10180

FILED
Apr 15, 2009
Secretary of State

Entity Name: BRENTWOOD LODGE NO. 363 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202

New Principal Place of Business:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202

Current Mailing Address:

C/O ROY CONNOR SHEPPARD
220 OCEAN ST
JACKSONVILLE, FL 32202

New Mailing Address:

RICHARD E. LYNN
220 OCEAN ST
JACKSONVILLE, FL 32202

FEI Number: 23-7526575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARD, LYNN R
220 OCEAN STREET
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

LYNN, RICHARD E
220 OCEAN STREET
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

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRIDGES, GORDON B
Address: 7010 SCHWAB DR
City-St-Zip: PENSACOLA, FL 325046537

Title: D (X) Delete
Name: YOUNG, KENNETH R
Address: 6114 ALICIA DR
City-St-Zip: PENSACOLA, FL 325044709

Title: JWD () Delete
Name: SMITH, BUFORD E
Address: 704 S I ST.
City-St-Zip: PENSACOLA, FL 325015235

Title: D (X) Delete
Name: BRYANT, JAMES L
Address: 34 WHITEHEAD DR
City-St-Zip: PENSACOLA, FL 32503

Title: TD () Delete
Name: AGERTON, JOHN E
Address: 4707 NICHOLS CREEK RD
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: JWD (X) Change () Addition
Name: FINDLEY, ALBERT C SR
Address: 20800 BRINKS WILLIS ROAD
City-St-Zip: FOLEY, AL 365353815

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: WMD (X) Change () Addition
Name: SMITH, BUFORD E
Address: 704 S I ST.
City-St-Zip: PENSACOLA, FL 325015235

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

04/15/2009

Electronic Signature of Signing Officer or Director

Date