

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10201

FILED  
Feb 25, 2012  
Secretary of State

**Entity Name:** OMEGA LODGE NO. 380 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:** 59-1961772

**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: JWD  
Name: GRAY, JOHN I  
Address: 6336 HIGHWAY 85 NORTH  
City-St-Zip: CRESTVIEW, FL 32536

Title: SWD  
Name: REDDING, EMMIT A  
Address: 219 GLYNDA COURT NW  
City-St-Zip: FT WALTON BEACH, FL 32548

Title: WMD  
Name: OWENS, ERIC E  
Address: 105 1ST AVENUE LOT B  
City-St-Zip: SHALIMAR, FL 32579

Title: SD  
Name: WEAVER, JOHN A  
Address: 615 MAINE AVENUE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: TD  
Name: WEHLING, THORNLEY T  
Address: 143 WRIGHT CIRCLE  
City-St-Zip: NICEVILLE, FL 32578

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

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02/25/2012

Electronic Signature of Signing Officer or Director

Date