

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10269

FILED
Feb 11, 2012
Secretary of State

Entity Name: MICANOPY LODGE NO. 29 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:

P. O. BOX 1020
220 OCEAN ST
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 59-3119776 **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: WM
Name: WOOD, ALAN L
Address: P. O. BOX 19
City-St-Zip: MCINTOSH, FL 326640019

Title: JWD
Name: MCCULLORS, DAVID
Address: P. O. BOX 372
City-St-Zip: HIGH SPRINGS, FL 32655

Title: SD
Name: DAVIS, MARVIN R
Address: P. O. BOX 154
City-St-Zip: MICANOPY, FL 326670154

Title: TD
Name: VAN ARNAM, RANKIN D
Address: RR 2, BOX 366
City-St-Zip: MICANOPY, FL 326679421

Title: SWD
Name: WILLIAMSON, ZACHARY E
Address: 5542 S/W 8TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

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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02/11/2012

Electronic Signature of Signing Officer or Director

Date