

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10271

FILED
Feb 06, 2009
Secretary of State

Entity Name: GREENVILLE LODGE NO. 28 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:

P. O. BOX 1020
220 OCEAN ST.
JACKSONVILLE, FL 32201

FEI Number: 23-7526341

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 () Delete
Name: SIRMON, JOHN W
Address: 5490 NW HONEY LAKE RD
City-St-Zip: GREENVILLE, FL 323314040

Title: S () Delete
Name: LOVE, DONALD W
Address: 3848 GREEN FARM RD
City-St-Zip: PERRY, FL 323479058

Title: SWD () Delete
Name: SHERROD, JAMES ZORN
Address: P.O. BOX 596, N/A
City-St-Zip: GREENVILLE, FL 32331

Title: T () Delete
Name: CANE, FOUNTAIN C JR
Address: 4280 JOHNSON STRIPLING RD
City-St-Zip: PERRY, FL 32347

Title: D () Delete
Name: DAY, ASHLEY W
Address: POX BOX 66
City-St-Zip: GREENVILLE, FL 323310066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: WMD (X) Change () Addition
Name: SHERROD, JAMES Z
Address: P. O. BOX 596
City-St-Zip: GREENVILLE, FL 32331

Title: SD (X) Change () Addition
Name: LOVE, DONALD W
Address: 3848 GREEN FARM RD
City-St-Zip: PERRY, FL 32347

Title: JWD (X) Change () Addition
Name: WALDREP, ALBERT H JR
Address: 170 NE RIDGE LOOP
City-St-Zip: MADISON, FL 32340

Title: TD (X) Change () Addition
Name: CONE, FOUNTAIN C JR
Address: 4280 JOHNSON STRIPLING RD
City-St-Zip: PERRY, FL 32347

Title: SWD (X) Change () Addition
Name: DAY, ASHLEY W
Address: POX BOX 66
City-St-Zip: GREENVILLE, FL 32331

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

02/06/2009

Electronic Signature of Signing Officer or Director

Date