

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10277

FILED
Mar 01, 2009
Secretary of State

Entity Name: WESCONNETT LODGE NO. 297 FREE AND ACCEPTED MASONS OF FLORIDA

Current Principal Place of Business:

ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

RICHARD E. LYNN
220 OCEAN ST.
JACKSONVILLE, FL 32202 US

Current Mailing Address:

ROY CONNOR SHEPPARD
220 OCEAN ST.
JACKSONVILLE, FL 32202 US

New Mailing Address:

RICHARD E. LYNN
220 OCEAN ST.
JACKSONVILLE, FL 32202 US

FEI Number: 59-3119984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, RICHARD E
220 OCEAN ST
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: D () Delete
Name: HIGHTOWER, WAYNE N
Address: 7563 CLIFF COTTAGE DR
City-St-Zip: JACKSONVILLE, FL 322444460

Title: SD () Delete
Name: YEATON, BERTON G JR
Address: 8407 MAPLE ST
City-St-Zip: JACKSONVILLE, FL 322441039

Title: SW () Delete
Name: MAZUREK, MICHAEL
Address: 4861 LOFTY PINES CIR W
City-St-Zip: JACKSONVILLE, FL 322105910

Title: JW () Delete
Name: DAVIS, KEITH K
Address: 8570 RAMPART RD
City-St-Zip: JACKSONVILLE, FL 322445910

Title: TD () Delete
Name: ST JACQUES, RONALD R
Address: 6444 WILSON BLVD
City-St-Zip: JACKSONVILLE, FL 322103720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SWD (X) Change () Addition
Name: ROSLER, GARY M
Address: 8459 CHARLESGATE CIRCLE E
City-St-Zip: JACKSONVILLE, FL 322446327

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

Title: WMD (X) Change () Addition
Name: MAZUREK, MICHAEL
Address: 4861 LOFTY PINES CIR W
City-St-Zip: JACKSONVILLE, FL 322105910

Title: JW (X) Change () Addition
Name: HAMILTON, ERIC H
Address: 5030 YEARLING LANE
City-St-Zip: JACKSONVILLE, FL 322107987

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

03/01/2009

Electronic Signature of Signing Officer or Director

_____ Date