

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10294

FILED
Mar 06, 2010
Secretary of State

Entity Name: LEHIGH ACRES LODGE NO. 344 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: 59-1379537 **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: SWD
Name: KING, RUSSELL R
Address: 12 ARTHUR AVE
City-St-Zip: LEHIGH ACRES, FL 33936

Title: WMD
Name: HOLLINGER, JASON M
Address: 5535 BANNING STREET
City-St-Zip: LEHIGH ACRES, FL 339716472

Title: TD
Name: POKORNY, ARTHUR
Address: 315 5TH AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: JWD
Name: CAVANAUGH, SAMUEL J
Address: 1116 N/E 36TH TERRACE
City-St-Zip: CAPE CORAL, FL 33909

Title: SD
Name: POKORNY, GERALD
Address: 315 5TH AVE
City-St-Zip: LEHIGH ACRES, FL 339725127

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

GS

03/06/2010

Electronic Signature of Signing Officer or Director

_____ Date