

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# C10314

**FILED**  
**Jan 24, 2010**  
**Secretary of State**

**Entity Name:** HILLSBOROUGH LODGE NO. 25 FREE AND ACCEPTED MASONS OF FLORIDA

**Current Principal Place of Business:**

RICHARD E. LYNN  
220 OCEAN ST  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-0291480

**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 32201 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: HOOKER, JOHN D  
Address: 13610 US HWY 92 E  
City-St-Zip: DOVER, FL 33527

Title: SWD  
Name: KENNEDY, JOSEPH  
Address: 1414 LORETTA CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: SD  
Name: NEWTON, THOMAS C  
Address: 508 EAST KENNEDY BLVD  
City-St-Zip: TAMPA, FL 33602

Title: WMD  
Name: BUSTIN, JAMES F  
Address: 10609 COQUITA LANE  
City-St-Zip: TAMPA, FL 33618

Title: TD  
Name: JACOBSON, STEPHEN B  
Address: P. O. BOX 18143  
City-St-Zip: TAMPA, FL 336798143

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

01/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date