

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10323

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** J. WENDELL FARGIS LODGE NO. 356 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:** 23-7166479

**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: WMD  
Name: GREEN, JACK A  
Address: 14414 WOODFIELD CIRCLE SOUTH  
City-St-Zip: JACKSONVILLE, FL 322586422

Title: JWD  
Name: BAADE, JAMES R JR  
Address: 2221 ST MARTINS DRIVE E  
City-St-Zip: JACKSONVILLE, FL 32246

Title: SWD  
Name: POTRU, SIRISH V  
Address: 1315 SHALLOWATER ROAD  
City-St-Zip: JACKSONVILLE, FL 32258

Title: TD  
Name: BARFIELD, ARTHUR W  
Address: 12643 HOLLY SPRINGS COURT  
City-St-Zip: JACKSONVILLE, FL 32246

Title: SD  
Name: LILLY, JOHN J  
Address: 2130 FLORIDA BLVD  
City-St-Zip: NEPTUNE BEACH, FL 322661612

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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02/24/2012

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

\_\_\_\_\_  
Date