

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# C10341

FILED
Mar 01, 2009
Secretary of State

Entity Name: SHAMROCK LODGE NO. 268 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:

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

FEI Number: 23-7523498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, RICHARD
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: S () Delete
Name: FLAHERTY, LESTER D
Address: PO BOX 34
City-St-Zip: SUWANNEE, FL 32692

Title: SW () Delete
Name: JESTER, NORMAN V
Address: PO BOX 203
City-St-Zip: STEINHATCHEE, FL 32359

Title: D () Delete
Name: HANCOCK, KEITH E
Address: 245 SW 311 AVE
City-St-Zip: STEINHATCHEE, FL 323595183

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: FLAHERTY, LESTER D
Address: PO BOX 34
City-St-Zip: SUWANNEE, FL 32692

Title: WMD (X) Change () Addition
Name: JESTER, NORMAN V
Address: PO BOX 203
City-St-Zip: STEINHATCHEE, FL 32359

Title: JWD (X) Change () Addition
Name: ELDER, DAVID H JR
Address: 643 EAST 39TH AVENUE
City-St-Zip: CROSS CITY, FL 32628

Title: SWD () Change (X) Addition
Name: KOBERLEIN, FREDERICK L
Address: P. O. BOX 91
City-St-Zip: SUWANNEE, FL 326920091

Title: TD () Change (X) Addition
Name: BARBER, MARTIN C
Address: P. O. BOX 1146 NA
City-St-Zip: CROSS CITY, FL 32628

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