

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009442

FILED  
Mar 25, 2011  
Secretary of State

**Entity Name:** EUREKA NORTH SHORE LODGE NO. 269, INC., FREE AND ACCEPTED MASONS OF FLORIDA

**Current Principal Place of Business:**

RICHARD E. LYNN  
220 OCEAN STREET N.  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

RICHARD E. LYNN  
220 OCEAN STREET  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 20-1726361

**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: JWD  
Name: GOLDENBERG, SOL  
Address: 15011 FEATHERSTONE WAY  
City-St-Zip: DAVIE, FL 33331

Title: SD  
Name: FORONDA, ARMANDO  
Address: 9000 S/W 122 STREET  
City-St-Zip: MIAMI, FL 33176

Title: SWD  
Name: KING, SYDNEY  
Address: 5444 N/W 76TH AVENUE  
City-St-Zip: MARGATE, FL 33063

Title: TD  
Name: BOUBAN, OUSSAMA  
Address: 9411 S.W. 49 STREET  
City-St-Zip: COOPER CITY, FL 33328

Title: WMD  
Name: CANAKAKIS, NICHOLAS  
Address: 5780 PRINCESS PALM COURT APT B  
City-St-Zip: DELRAY BEACH, FL 33484

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

03/25/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date