

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009442

FILED
Feb 19, 2012
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: LENGHEA, DANIEL
Address: 500 THREE ISLAND BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009

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

Title: WMD
Name: KING, SYDNEY
Address: 2111 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: SWD
Name: KLONARIDES, GERARD
Address: 19927 S/W 3RD PLACE
City-St-Zip: PEMBROKE PINES, FL 33029

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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02/19/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date