

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001024

FILED  
Feb 19, 2012  
Secretary of State

**Entity Name:** OKEECHOBEE LODGE NO. 237 FREE AND ACCEPTED MASONS OF FLORIDA, INC.

**Current Principal Place of Business:**

RICHARD E. LYNN  
220 OCEAN STREET  
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:** 23-7526479

**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: JWD  
Name: LOZANO, JAMES E  
Address: 1410 S/E 6TH STREET  
City-St-Zip: OKEECHOBEE, FL 349744763

Title: SWD  
Name: ALGER, HUGH B  
Address: 1426 S/W 44TH BLVD  
City-St-Zip: OKEECHOBEE, FL 34974

Title: WMD  
Name: WILLIAMS, GEORGE R  
Address: 19535 N/W 80TH DRIVE  
City-St-Zip: OKEECHOBEE, FL 34992

Title: TD  
Name: VENSEL, FRANCIS J III  
Address: 2002 S.PARRITT AVENUE  
City-St-Zip: OKEECHOBEE, FL 349746183

Title: SD  
Name: HOLT, RICHARD A  
Address: 903 SW 4TH AVENUE  
City-St-Zip: OKEECHOBEE, FL 349745211

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