Entity Name: LEWIS A. ARMISTEAD LODGE NO. 403, INC., FREE AND ACCEPTED MASONS OF FLORIDA

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

RICHARD E. LYNN 220 OCEAN STREET JACKSONVILLE, FL 32202

# **Current Mailing Address:**

DOCUMENT# N08000010834

RICHARD E, LYNN 220 OCEAN STREET JACKSONVILLE, FL 32202

## FEI Number: 68-0672531

#### Name and Address of Current Registered Agent:

LYNN, RICHARD E 220 OCEAN STREET JACKSONVILLE, FL 32202 US

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

## Officer/Director Detail :

Title	PRESIDENT	Title	SECRETARY	
Name	COLE, ERIC G	Name	LANHAM, CHRISTOPHER C	
Address	3192 LITCHFIELD DR	Address	1015 ARTHUR MOORE DR	
City-State-Zip:	ORANGE PARK FL 32065	City-State-Zip:	GREEN COVE SPRINGS FL 32043	
Title	TREASURER	Title	VP	
Name	OLSEN, THOMAS A	Name	BURKETT, RANDAL L	
Address	4115 SPRING CREEK LN	Address	564 ARTESIAN LN	
City-State-Zip:	MIDDLEBURG FL 32068	City-State-Zip:	ORANGE PARK FL 32073	
Title	DIRECTOR			
Name	SMALLWOOD, EDWARD L			
Address	1178 ARDMORE ST			

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.

SECRETARY

## SIGNATURE: CHRISTOPHER C. LANHAM

City-State-Zip: SAINT AUGUSTINE FL 32092

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

01/30/2022 Date