

**2017 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10031

**FILED**  
**Jan 30, 2017**  
**Secretary of State**  
**CC4360175088**

**Entity Name:** SAINT ANDREWS LODGE NO. 212 FREE ANDD ACCEPTED  
MASONS OF FLORIDA

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number: 59-1379644**

**Certificate of Status Desired: No**

**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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           WERNER, FRED W  
Address        2802 WOODMERE DR  
City-State-Zip: PANAMA CITY FL 32405

Title           TREASURER  
Name           BOWDISH, CHRISTOPHER M  
Address        2814 W 22ND STREET  
City-State-Zip: PANAMA CITY FL 32405

Title           DIRECTOR  
Name           GALARZA, IGNACIO L  
Address        106 PALM CROSSING BLVD  
City-State-Zip: PANAMA CITY BEACH FL 32408

Title           PRESIDENT  
Name           BOWDEN, DALLAS T  
Address        2913 HAWKS LANDING BLVD  
City-State-Zip: PANAMA CITY FL 32405

Title           SECRETARY  
Name           LLOYD, JACK M JR.  
Address        P. O. BOX 16045  
City-State-Zip: PANAMA CITY FL 32406

*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: JACK M. LLOYD, JR.**

**SECRETARY**

**01/30/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date