

2020 NOT FOR PROFIT REGISTRATION ANNUAL REPORT

DOCUMENT# C10043

Entity Name: TAMPA BAY LODGE NO. 252 FREE AND ACCEPTED MASONS
OF FLORIDA**FILED**
Jan 25, 2020
Secretary of State
5309025310CC**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: 59-2618509****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 VP
Name MCMILLAN, RONALD L
Address 7360 ULMERTON RD APT 30C
City-State-Zip: LARGO FL 33771Title DIRECTOR
Name VALLE, RUSTY B
Address 11318 MALLORY SQUARE DR
APT 201
City-State-Zip: TAMPA FL 33760Title PRESIDENT
Name HARTWICK, MICHAEL R
Address 7 VALENCIA CIR
City-State-Zip: SAFETY HARBOR FL 34695Title SECRETARY
Name ADKINS, CHRISTOPHER M
Address P. O. BOX 162
City-State-Zip: SAFETY HARBOR FL 34695

Title TREASURER
Name JAMES, KELFRYN W
Address 1033 MISTY HOLLOW LANE
City-State-Zip: TARPON SPRINGS FL 346899226

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: CHRISTOPHER M. ADKINS**SECRETARY****01/25/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date