

**2024 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10043

**Entity Name:** TAMPA BAY LODGE NO. 252 FREE AND ACCEPTED MASONS  
OF FLORIDA**FILED**  
**Jan 21, 2024**  
**Secretary of State**  
**8524856013CC****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 ANGE, LOUIS P  
Address 6 FERN CT  
City-State-Zip: SAFETY HARBOR FL 34695Title SECRETARY  
Name SANTIAGO, JULIUS C  
Address 354 MAIN ST  
City-State-Zip: SAFETY HARBOR FL 34695Title PRESIDENT  
Name NORWICH, ALLEN W  
Address 1607 WHITEWOOD DR  
City-State-Zip: CLEARWATER FL 33765Title TREASURER  
Name JAMES, KELFRYN W  
Address 1033 MISTY HOLLOW LANE  
City-State-Zip: TARPON SPRINGS FL 34688Title DIRECTOR  
Name MERTZ, DUANE W  
Address 2062 GROVE LN  
City-State-Zip: CLEARWATER FL 33763

*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: JULIUS C. SANTIAGO****SECRETARY****01/21/2024**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date