

2019 NOT FOR PROFIT REGISTRATION ANNUAL REPORT

DOCUMENT# C10043

Entity Name: TAMPA BAY LODGE NO. 252 FREE AND ACCEPTED MASONS
OF FLORIDA**FILED**
Feb 26, 2019
Secretary of State
4920312897CC**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	DIRECTOR
Name	MCMILLAN, RONALD L
Address	7360 ULMERTON RD APT 30C
City-State-Zip:	LARGO FL 33771

Title	SECRETARY
Name	ADKINS, CHRISTOPHER M
Address	P. O. BOX 162
City-State-Zip:	SAFETY HARBOR FL 34695

Title	PRESIDENT
Name	CARDENAS, AARON M
Address	1971 GEORGIA CIR N
City-State-Zip:	CLEARWATER FL 33760

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

Title	VP
Name	HARTWICK, MICHAEL R
Address	7 VALENCIA CIR
City-State-Zip:	SAFETY HARBOR FL 34695

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****02/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date