

**2021 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10062

**FILED**  
**Jan 16, 2021**  
**Secretary of State**  
**2668367798CC**

**Entity Name:** BOYNTON LODGE NO. 236 FREE AND 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: 59-1980138**

**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 OTTO, STEPHEN  
Address 4285 MANGO TREE CT  
APT B  
City-State-Zip: BOYNTON BEACH FL 33436

Title TREASURER  
Name KAYE, MARTIN  
Address 12562 CORAL LAKES DR  
City-State-Zip: BOYNTON BEACH FL 33437

Title PRESIDENT  
Name SCHWARTZBERG, SCOTT  
Address 13593 BRETON LANE  
City-State-Zip: DELRAY BEACH FL 33446

Title SECRETARY  
Name GAMBARROTTI, MICHAEL R  
Address 1384 PRIMROSE LANE  
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR  
Name ROSADO, EUGENIO  
Address 1290 WOODBINE WAY  
APT 1207  
City-State-Zip: RIVIERA BEACH FL 33418

*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: MICHAEL R. GAMBARROTTI**

**SECRETARY**

**01/16/2021**

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

\_\_\_\_\_  
Date