

**2023 NOT FOR PROFIT REGISTRATION ANNUAL REPORT**

DOCUMENT# C10062

**Entity Name:** BOYNTON LODGE NO. 236 FREE AND ACCEPTED MASONS OF FLORIDA

**FILED**  
**Jan 11, 2023**  
**Secretary of State**  
**8829572235CC**

**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           DIRECTOR  
Name           REEVE, JOHN  
Address       6573 MARISSA CIR  
City-State-Zip: LAKE WORTH FL 33467

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

Title           PRESIDENT  
Name           MALLOY, ERIC  
Address       8201 TOBAGO LANE  
City-State-Zip: WELLINGTON FL 33414

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

Title           VP  
Name           COHEN, ALAN  
Address       5775 FERNLEY DR W  
                  APT 85  
City-State-Zip: WEST PALM BEACH FL 33415

*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 GAMBARROTTI**

**SECRETARY**

**01/11/2023**

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

\_\_\_\_\_  
Date