

2013 NOT FOR PROFIT REGISTRATION ANNUAL REPORT

DOCUMENT# C10294

Entity Name: LEHIGH ACRES LODGE NO. 344 FREE AND ACCEPTED
MASONS OF FLORIDA**FILED**
Mar 03, 2013
Secretary of State
CC6110395602**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 US**FEI Number: 59-1379537****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 PRESIDENT
Name GOEHLE, PAUL C
Address 502 EMPIRE AVENUE SOUTH
City-State-Zip: LEHIGH ACRES FL 33936Title DIRECTOR
Name CURETON, GEORGE R
Address 1420 GRANDALE ST
City-State-Zip: LEHIGH ACRES FL 33970Title TREASURER
Name POKORNY, ARTHUR
Address 315 5TH AVE
City-State-Zip: LEHIGH ACRES FL 33972Title DIRECTOR
Name AKARD, DANIEL G
Address 14130 CHANCIELLOR STREET
City-State-Zip: FT. MYERS FL 33905Title SECRETARY
Name POKORNY, GERALD
Address 315 5TH AVE
City-State-Zip: LEHIGH ACRES FL 33972-5127

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: GERALD POKORNY**SECRETARY****03/03/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date