2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT #701447

1. Entity Name

SERTOMA CLUB OF LAKELAND INCORPORATED



FILED Apr 30, 2007 08:00 All Secretary of State

Principal Place of Business 1747 GARY ROAD EAST LAKELAND, FL 33801 Mailing Address P.O. BOX 273 LAKELAND, FL



04192007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2061811

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERMAN, STEPHEN D 1271 SCOTTSLAND DRIVE LAKELAND, FL 33813

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE			equired when reinstating)	DATE
	1 111118 1 00 10 40 1.20	ection Campaign Financing ust Fund Contribution	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LAKE, CHARLES 1747 GARY ROAD EAST LAKELAND, FL 33801			U00000748813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HERMAN, STEPHEN 1271 SCOTTSLAND DRIVE LAKELAND, FL 33813			° 05/17/07=80082-014 61√25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WEINSTEIN, RAOUL L 1533 LAGOON RD. LAKELAND, FL 33803		DO N	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CONTI, ANTHONY 4421 HALLAMVIEW LN LAKELAND, FL 33813		IN T	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director.				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with a ladgress, with all other like empowered.

SIGNATURE

AVIE AND TYPES OR PRINTED NAME OF BIGHING OFFICER OR GIRECTOR

STEPHEN D. HERMAN V.P. 4

4/26/07

863-701-7799