

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 704950 (5)

1. Corporation Name
LIONS CLUB OF BRADENTON, INC.

Principal Place of Business Mailing Address

**C/O BEATRICE EISENBACH, SECRETARY
POST OFFICE BOX 945
BRADENTON FL 34208**

**C/O BEATRICE EISENBACH, SECRETARY
POST OFFICE BOX 945
BRADENTON FL 34208**

3. Date Incorporated or Qualified: **12/18/1962** 3a. Date of Last Report: **03/16/1994**

4. FEI Number: **59-6147326** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 193.032, Florida Statutes: Yes No

2. Principal Place of Business 2a. Mailing Address

21 **Lions Club of Bradenton** 21 **Lions Club of Bradenton**

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **P.O. BOX 945** 27

City & State City & State

23 **Bradenton, Fl.** 28

Zip Country Zip Country

24 **34206** 25 **USA** 29 30

9. Name and Address of Current Registered Agent

**EISENBACH, SAMUEL
1219 51ST AVE. EAST
SUITE 93
BRADENTON FL 34203**

10. Name and Address of New Registered Agent

81 Name: **Don Leavitt**

82 Street Address (P.O. Box Number is Not Acceptable): **5815 18th ST. W.**

83

84 City: **Bradenton** FL 85 Zip Code: **34207**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Don Leavitt* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEAVITT, DON	1.2 NAME	Pierre Dagenais
STREET ADDRESS	5815 18TH ST., W.	1.3 STREET ADDRESS	1402 Magellan Dr.
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	Bradenton, Fl. 34243
TITLE	DT	2.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EISENBACH, SAMUEL	2.2 NAME	Samuel Eisenbach
STREET ADDRESS	1219 51ST AVE., E #93	2.3 STREET ADDRESS	1219 51st Ave. E. # 93
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	Bradenton, Fl. 34203
TITLE	S	3.1 TITLE	1st V.P. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EISENBACH, BEATRICE	3.2 NAME	Chester Knight
STREET ADDRESS	1219 51ST AVENUE E #93	3.3 STREET ADDRESS	1219 51st Ave. E. # 54
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	Bradenton, Fl. 34203
TITLE	T	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BEER, ALOIS	4.2 NAME	Don Leavitt
STREET ADDRESS	5331 5TH ST., CT., E.	4.3 STREET ADDRESS	5815 18th St. W.
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	Bradenton, Fl. 34203
TITLE	D	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, JAMES	5.2 NAME	Ed Jackson
STREET ADDRESS	1203 DENAVAEZ AVE.	5.3 STREET ADDRESS	7202 10th Ave. W.
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	Bradenton, Fl. 34209
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALDRON, THOMAS	6.2 NAME	Dale Lapish
STREET ADDRESS	3410 WILLOW OAK BAY BLVD.	6.3 STREET ADDRESS	1219 51st Ave. E. # 168
CITY-ST-ZIP	BRADENTON FL	6.4 CITY-ST-ZIP	Bradenton, Fl. 34203

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Don Leavitt* (813) 755-5209 Date: (Type Phone #)