2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008
Secretary of State

DOCUMENT# N03000003186

Entity Name: THE OCOEE LIONS FOUNDATION, INC.

Current Principal Place of Business:

108A TAYLOR ST.
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

108A TAYLOR ST.
OCOEE, FL 34761

New Mailing Address:

FEI Number: 59-2463920 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SILLS, JIMMY F
205 SOUTH LAKESHORE DR.
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	SEC	( ) Delete
Name:	O'HALLORAN, MICHAEL	
Address:	1264 N FAIRWAY DR	
City-St-Zip:	APOPKA, FL 32712	
Title:	PRES	( ) Delete
Name:	SILLS, CATHY	
Address:	205 S LAKESHORE DR	
City-St-Zip:	OCOEE, FL 34761 FL	
Title:	2VP	( ) Delete
Name:	EVERETT, BRANDY	
Address:	1010 ARIZONA CT	
City-St-Zip:	OCOEE, FL 34761 US	
Title:	DR	( ) Delete
Name:	GODEK, ROBERT	
Address:	1316 OLYMPIA PARK CIR.	
City-St-Zip:	OCOEE, FL 34761 US	
Title:	DR	( ) Delete
Name:	MCEVERS, MICHAEL	
Address:	909 HYLAND SPRINGS DR	
City-St-Zip:	OCOEE, FL 34761 US	
Title:	TRE	( ) Delete
Name:	WHEELER, DAVID	
Address:	113 WINDTREE LN	
City-St-Zip:	WINTER GARDEN, FL 34787 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	2VP	(X) Change ( ) Addition
Name:	EVERETT, BRANDY	
Address:	5 SILLS ALLEY	
City-St-Zip:	OCOEE, FL 34761 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JIMMY F SILLS DR 01/14/2008

Electronic Signature of Signing Officer or Director — Date