

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90164 016 ****61.25

DOCUMENT # N08966

1. Entity Name

LION'S ROAR INTERNATIONAL, INC.



Principal Place of Business

1130 - B E. PLANT ST
 WINTER GARDEN FL 34787
 US

Mailing Address

P.O. BOX 751
 OAKLAND FL 34760
 US

34060750



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2525611

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRALAND, DAVID D
 1043 MESA VERDE COURT
 CLERMONT FL 34711

Name

Street Address (P.O. Box Number is Not Acceptable)

221 So. Boyd St.

City

WINTER GARDEN

FL

Zip Code

34787

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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
D	BRALAND, DAVID D.	1043 MESA VERDE COURT	CLERMONT FL 34711	<input type="checkbox"/>
D	GARBER, JAN	14329 PINE CONE TR	CLERMONT FL 34711	<input checked="" type="checkbox"/>
D	BUKAR, DIANE	7790 SW 127TH ST	MIAMI FL 33156-6042	<input checked="" type="checkbox"/>
D	GOMEZ, NEBBY	2032 ARUBA COURT	KISSIMMEE FL 34741-3080	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
DIRECTOR	ROGER KELLY	6310 GAMBLE DR.	ORLANDO, FL. 32818-4012	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DIRECTOR	DAN CHASSIE	4738 N.E. 49TH BLVD.	WILDWOOD, FL. 34785	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DIRECTOR	DARRYL BRALAND	550 SO. BLUFORD AVE.	OCFEE, FL. 34761	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 an address, with all other like empowered.

SIGNATURE:

David D. Braland
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-04 407-832-2061
 Date Daytime Phone #