## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Zip

## **DOCUMENT # N20273**

1. Entity Name

Zip

Country



**FILED** Mar 31, 2003 8:00 am Secretary of State

Applied For

\$8,75 Additional

Fee Required

Not Applicable

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5. Certificate of Status Desired

FORT LAUDERDALE LIONS CLUB, INC.			03-31-2003 901/1 001 *****
Principal Place of Business	Mailing Address		
C/O STEPHEN B ROSENTHAL 8142 NO UNIVERSITY DR TAMARAC FL 33321 US	8142 N. UNIVERSITY DR. Tamarac Fl. 33321 US	,	} } }
2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & State	City & State	·	4. FEI Number 59-6170009

7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROSENTHAL STEPHEN B ESQ Street Address (P.O. Box Number is Not Acceptable) 8142 N UNIVERSITY DR TAMARAC FL 33321 Zip Code City

Country

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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE ☐ Delete RILANE W6 street TITLE **BRAUSS, JIM** NAME NAME 1528 NW 4 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Addition TITLE TITLE Delete DAVIS, JOE ---- ~ NAME NAME STREET ADDRESS STREET ADDRESS 4820 SW 17 ST CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Addition ☐ Delete ☐ Change TITLE **BRAUSS, ROBERT** NAME NAME STREET ADDRESS STREET ADDRESS 3628 SW 23RD CT CITY-ST-ZIE CITY-ST-ZIP FORT LAUDERDALE FL 33312 ☐ Change ☐ Addition ☐ Delete TITLE CRAM. LORRIE NAME NAME STREET ADDRESS 5240 S.W. 26 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33312 ☐ Change ☐ Addition **⊠** Delete TITLE TITLE SKINNER, SELWYN NAME NAME STREET ADDRESS STREET ADDRESS 17451 SW 33RD ST CITY-ST-ZIP CITY-ST-7IP MIRAMAR FL 33025 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME HOWLAND, DIANE NAME STREET ADDRESS STREET ADDRESS 8132 SO CORAL CIRCLE CITY-ST-7IP CITY-ST-ZIP N LAUDERDALE FL 33068

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:

3/24/2003

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