2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N95000003577 Jan 18, 2000 8:00 am 1. Entity Name **Secretary of State** NEWBERRY LIONS CLUB, INC. 01-18-2000 90202 029 ****61.25 Principal Place of Business Mailing Address 25355 WEST NEWBERRY RD. PO BOX 1439 NEWBERRY FL 32669-1439 NEWBERRY FL 32669 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RESPESS, ROBERT D. 25355 WEST NEWBERRY RD. **NEWBERRY FL 32669** Zip Code 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. 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 **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Director Change ▼ Addition Delete TITLE Don Davis NAME VARNON, JACK STREET ADDRESS 150 SW Fairway Drive 22808 NW 62ND AVE STREET ADDRESS CITY-ST-7IP Keystone Heights, FL CITY-ST-ZIP **NEWBERRY FL 32669** ☐ Change **Addition** Director □XI Delete TITLE TITLE Jimmy Rogers DEPETER, THOMAS G NAME PO-BOX 335 25446 SW 5th AVE STREET ADDRESS STREET ADDRESS PO BOX 1590 N/A CITY-ST-ZIP Newberry, FL 32669 CITY-ST-ZIP NEWBERRY FL 32669 President X Addition ☐ Change TITLE TITLE ☐ Delete Carroll Cumbee **ELLIOT, GENE** NAME NAME 25333 SW 16= AVE. 210 NW 2544 ST STREET ADDRESS STREET ADDRESS PO BOX 511 N/A Newberry, FL 32669 CITY-ST-ZIP CITY-ST-ZIP **NEWBERRY FL 32669** Director Bill Stone Delete ☐ Change 🛣 Addition TITLE TITLE **DURST, RAY** NAME 16906 SW 5th Place STREET ADDRESS STREET ADDRESS 230 N. MAIN ST. Newberry, FL 32669 CITY-ST-ZIP CITY-ST-ZIP NEWBERRY FL Secretary / Treasurer **XX** Change ☐ Delete Addition TITLE Robert D. Respess RESPESS, ROBERT D NAME 25355 W. Newberry Road STREET ADDRESS STREET ADDRESS 385 W CENTRAL AVE CITY-ST-ZIP Newberry, FL CITY-ST-ZIP NEWBERRY FL 32669 Vice President TITLE ☐ Change Addition TITI F NAME Ken Kleckner NAME 25338 SWILL AVE STREET ADDRESS STREET ADDRESS PO Box 475 CITY-ST-ZIP CITY-ST-7IP 32669 Newberry, FL 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

CHARLES AND THE CONTROL OF SIGNING CHERCE OF DIRECTOR

1/10/00

352-472-5434

Daytime Phone #

CR2E037