2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002176

FILED Mar 21, 2008 Secretary of State

Entity Name: MANATEE COUNTY LIONS SIGHT CONSERVATION, INC.

Current Principal Place of Business:			New Principal	New Principal Place of Business:	
	AVENUE WESTON, FL 3420S				
Current Mailing Address:			New Mailing A	New Mailing Address:	
PO BOX 1 BRADENT	722 TON, FL 34206	6			
FEI Number	: 59-1702646	FEI Number Applied For ()	FEI Number Not Applicable	e () Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Add	Iress of New Registered Agent:	
6709 9TH BRADENT The above	LAWRENCE I AVENUE WES FON, FL 3420S e named entity e of Florida.	ST 9 US	purpose of changing its re	gistered office or registered agent, or both,	
SIGNATU					
SIGNATO		nic Signature of Registered Ag	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CI	HANGES TO OFFICERS AND DIRECTORS	
Γitle: Name: Address:) Delete RY . WEST	ADDITIONS/CI Title: Name: Address: City-St-Zip:	HANGES TO OFFICERS AND DIRECTORS () Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	T (COVINS, LARR 6709 9TH AVE BRADENTON,) Delete RY . WEST FL 34209) Delete SAM ENUE WEST	Title: Name: Address:		
OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	T (COVINS, LARE 6709 9TH AVE BRADENTON, D (EISENBACH, S 1219 51ST AVI BRADENTON,) Delete RY . WEST FL 34209) Delete SAM ENUE WEST FL 34203) Delete ZGAR, IM DR.	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: D Name: MET Address: 112	()Change ()Addition	
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address:	T (COVINS, LARE 6709 9TH AVE BRADENTON, D (EISENBACH, S 1219 51ST AVI BRADENTON, D (EDWARD MET 112 WILD PLU BRADENTON,) Delete RY . WEST FL 34209) Delete SAM ENUE WEST FL 34203) Delete ZGAR, IM DR. FL) Delete OTHY E	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: D Name: MET Address: 112	() Change () Addition () Change () Addition (X) Change () Addition IZGER, EDWARD WILD PLUM DR.	

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: LARRY COVINS T 03/21/2008