

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003577

Entity Name: NEWBERRY LIONS CLUB, INC.

Current Principal Place of Business:

25650 WEST NEWBERRY RD.
NEWBERRY, FL 32669-4102

Current Mailing Address:

PO BOX 1439
NEWBERRY, FL 32669-1439 US

FEI Number: 20-3572811

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RESPESS, ROBERT D.
25650 WEST NEWBERRY RD.
NEWBERRY, FL 32669-4102 US

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

Officer/Director Detail :

Title P
Name CARTER, JESS
Address PO BOX 636
City-State-Zip: NEWBERRY FL 32669-0636

Title VP
Name RICE, JUDY
Address 26240 SW 4TH AVENUE
City-State-Zip: NEWBERRY FL 32669

Title VP
Name HENDRIX, BARBARA
Address 26246 SW 4TH AVENUE
City-State-Zip: NEWBERRY FL 32669

Title ST
Name RESPESS, ROBERT D
Address 25650 W. NEWBERRY RD
City-State-Zip: NEWBERRY FL 32669-4102

Title D
Name ELLIOTT, GENE
Address 25333 SW 16TH AVENUE
City-State-Zip: NEWBERRY FL 32669

Title D
Name COLEMAN, JACK
Address PO BOX 951
City-State-Zip: NEWBERRY FL 32669-0951

I hereby 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 all other like empowered.

SIGNATURE: ROBERT D RESPESS

S/T

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date