

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 578203

1. Entity Name
THE LION'S DEN, INC.

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90359 029 ***150.00

Principal Place of Business
VILLA SANTINI PLAZA
ESTERO BLVD. SUITE 34
FORT MYERS BEACH FL 33931

Mailing Address
7205 ESTERO BLVD
STE 34
FORT MYERS BEACH FL 33931
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1992758

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

DONOVAN, JOHN E.
5391 PALMETTO STREET
FT MYERS FL 33931

Name: Donovan, John E.
Street Address (P.O. Box Number is Not Acceptable)
21562 Indian Bayou
City Ft. Myers Beh FL Zip Code 33931

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

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

John Donovan

(NOTE: Registered Agent signature required when reinstating)

DATE

4/4/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME DONOVAN, JOHN E.
STREET ADDRESS 7205 ESTERO BLVD. #727
CITY-ST-ZIP FORT MYERS BEACH FL 33931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Donovan

Date

4/4/02

Daytime Phone #

9414633442

CR2E034 (9/01)