2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 02, 2008 8:00 am Secretary of State **DOCUMENT # 700852** 1. Entity Name 04-02-2008 90018 006 ****61.25 FROSTPROOF LIONS CLUB, INC. Principal Place of Business Mailing Address 10404 HWY 27 LOT R57 10404 HWY 27 LOT R57 FROSTPROOF FL 33843 FROSTPROOF FL 33843 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LUCKENBACH, L.R. Street Address (P.O. Box Number is Not Acceptable) 10404 HWY 27 LOT R57 FROSTPROOF FL 33843 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and tale diapplicable. (NOTE: Registered Agent signature required when reinstating) Andrew Committee of the FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TITLE TITLE ☐ Change ▼ Addition Hutzelman, Paul 755 N Lake Ready Bluet LUCKENBACH, LESTER R NAME NAME 10404 HWY 27 LOT R57 ... STREET ADDRESS STREET ADDRESS FROSTPROOF FL 33843 Frostproof, FI CITY - ST- ZIP CITY-ST-79P TITLE ☐ Delate TITLE Change ■ Addition RESPRESS, ERNEST MARKE NAME 2010 N. LAKE REEDY BLVD STREET ADDRESS STREET ADDRESS FROSTPROOF FL 33843 CITY - ST - ZIP CITY-ST-ZP TITLE Delete Change ____ Addition TITLE COTTON, ARTHUR NAME NAME STREET ADDRESS 315 SUNSET RD STREET ADDRESS FROSTPROOF FL 33843 CITY-ST-ZIP CITY-ST-ZIP TITLE **D**alete ☐ Change TITLE ☐ Addition HESS, DONAD NAME NAME 134 W B STREET STREET ADDRESS STREET ADDRESS FROSTPROOF FL 33843 CITY-ST-ZiP CITY-ST-ZIP TILLE ☐ Delete TITLE Change Addition LUCKENBACH, SUE NAME NAME 10404 HWY 27 LOT R 57 STREET ADDRESS STREET ADDRESS FROSTPROOF FL 33843 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition RESPRESS, LYNN NAME NAME 2010 N. CAKE REEDY BLVD STREET ADDRESS STREET ADDRESS FROSTPROOF FL 33843 CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 except 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:

FILED