

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 26, 2000 8:00 am**  
**Secretary of State**

01-26-2000 90093 022 \*\*\*\*61.25

**DOCUMENT # 705154**

1. Entity Name

**PIERSON LIONS CLUB, INC.**

Principal Place of Business

Mailing Address

143 W. FIRST AVE.  
 PIERSON FL 32180  
 US

P.O. BOX 525  
 PIERSON FL 32180-0525

2. Principal Place of Business

143 W. 1<sup>ST</sup> AV.

3. Mailing Address

PO Box 525

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PIERSON, FL

City & State

PIERSON, FL

4. FEI Number

59-6170073

Applied For  
 Not Applicable

Zip

32180

Country

USA

Zip

32180-0525

Country

USA

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

STONE, KEVIN  
 665 BENNETT RD  
 PIERSON FL 32180

7. Name and Address of New Registered Agent

Name **Rik DAVIS**

Street Address (P.O. Box Number is Not Acceptable)  
**153 E 2ND AV**

City **PIERSON**

FL Zip Code **32180**

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

*Richard Frank Davis Secretary*

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

(NOTE: Registered Agent signature required when reinstating)

1/18/2000

DATE

**FILE NOW:**  
**FEF IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution.

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	HICKOX, RONALD	
STREET ADDRESS	696 VANNOTE RD.	
CITY-ST-ZIP	PIERSON FL 32180	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	PRICE, ERIC	
STREET ADDRESS	435 RAULERSON RD	
CITY-ST-ZIP	SEVILLE FL 32190	
TITLE	T	<input type="checkbox"/> Delete
NAME	BRADDOCK, JAMES	
STREET ADDRESS	678 VANNOTE RD.	
CITY-ST-ZIP	PIERSON FL 32180	
TITLE	D	<input type="checkbox"/> Delete
NAME	CARTER, BILLY	
STREET ADDRESS	235 TURNER ROAD	
CITY-ST-ZIP	PIERSON FL 32180	
TITLE	DC	<input type="checkbox"/> Delete
NAME	STONE, ROBERT	
STREET ADDRESS	807 S. CR 3	
CITY-ST-ZIP	PIERSON FL 32180	
TITLE	P	<input type="checkbox"/> Delete
NAME	HARTLEY, RICHARD	
STREET ADDRESS	202 S. CENTER ST.	
CITY-ST-ZIP	PIERSON FL 32180	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rik DAVIS	
STREET ADDRESS	153 E 2ND AV	
CITY-ST-ZIP	PIERSON, FL 32180	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMAR DIXON	
STREET ADDRESS	272 W. WASHINGTON AV.	
CITY-ST-ZIP	PIERSON, FL 32180	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

*Richard Frank Davis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/18/2000 904 749 4911