

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90041 018 ****61.25

DOCUMENT # 705154

1. Entity Name

PIERSON LIONS CLUB, INC.

Principal Place of Business

143 W. 1ST AVE
 PIERSON FL 32180
 US

Mailing Address

143 W. 1ST AVE
 PIERSON FL 32180
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6170073

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

DAVIS, RICK
153 E 2ND AVE
PIERSON FL 32180

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE 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 type="checkbox"/> Delete
NAME	DAVIS, RICK	
STREET ADDRESS	153 E 2ND AVE	
CITY-ST-ZIP	PIERSON FL 32180	
TITLE	T	<input type="checkbox"/> Delete
NAME	DIXON, LAMAR	
STREET ADDRESS	272 W WASHINGTON AVE	
CITY-ST-ZIP	SEVILLE FL 32190	
TITLE	VP	<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	D	<input type="checkbox"/> Delete
NAME	STONE, ROBERT	
STREET ADDRESS	807 S. CR 3	
CITY-ST-ZIP	PIERSON FL 32180	
TITLE	VP	<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	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES PETERSON	
STREET ADDRESS	267 S. VOHNSIA 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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/2001
 Date

904 547 3596
 Daytime Phone #

CR2E037 (10/00)