2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705154

FILED Jan 21, 2009 Secretary of State

Entity Name: PIERSON LIONS CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

143 W. 1ST AVE

PIERSON, FL 32180 US

Current Mailing Address: New Mailing Address:

P.O. BOX 525

PIERSON, FL 32180 US

FEI Number: 59-6170073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STONE, ROBERT E 807 SOUTH COUNTY RD 3 PIERSON, FL 32180

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete PETERSON, DOUGLAS PETERSON, DOUGLAS Name: Name: 325 WESTERN AVENUE Address: 325 WESTERN AVENUE Address:

City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

Title: Title: (X) Change () Addition () Delete

Name: DIXON, LAMAR Name: DIXON, LAMAR

Address: 272 W WASHINGTON AVE Address: 272 W WASHINGTON AVE City-St-Zip: SEVILLE, FL 32190 City-St-Zip: SEVILLE, FL 32190

Title: () Delete Title: (X) Change () Addition

BRADDOCK, JAMES BRADDOCK, JAMES Name: Name: 678 VANNOTE RD. 678 VANNOTE RD. Address: Address: City-St-Zip: PIERSON, FL 32180 City-St-Zip: PIERSON, FL 32180

Title: () Delete Title: () Change () Addition

Name: CARTER, BILLY Name: 235 TURNER ROAD Address: Address: City-St-Zip: PIERSON, FL 32180 City-St-Zip:

Title: () Delete Title: () Change () Addition

STONE, ROBERT Name: Name: 807 S. CR 3 Address: Address: City-St-Zip: PIERSON, FL 32180 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

BRADDOCK, EDDIE BRADDOCK, EDDIE Name: Name: Address: 5225 MYAKKA ROAD Address: 5225 MYAKKA ROAD

DE LEON SPRINGS, FL 32130 DE LEON SPRINGS, FL 32130 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT E. STONE **TREA** 01/21/2009