

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90906 048 ****61.25

DOCUMENT # **705916**

1. Entity Name

LIONS CLUB OF St. CLOUD, FLORIDA, INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

34 Brown Chapel Rd.

Suite, Apt. #, etc.

3. Mailing Address

201 Virginia Avenue

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
St. Cloud, FL

Zip

Country

City & State
St. Cloud, FL 34769-2435

Zip

Country

34769-2435

Osceola

4. FEI Number

Not Applicable

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name - Fisk, Robert A.

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

201 Virginia Ave.

City St. Cloud,

FL

Zip Code
34769-2435

**DO NOT WRITE
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	Joseph Henschen
STREET ADDRESS	4200 Hamilton Ct.
CITY-ST-ZIP	St. Cloud, FL 34769
TITLE	S
NAME	Robert A. Fisk
STREET ADDRESS	201 Virginia Ave.
CITY-ST-ZIP	St. Cloud, FL 34769-2435
TITLE	T
NAME	Howard E. Dietrich
STREET ADDRESS	4201 Hamilton Ct.
CITY-ST-ZIP	St. Cloud, FL 34769
TITLE	D
NAME	Frank Hedgecock
STREET ADDRESS	820 Florida Ave.
CITY-ST-ZIP	St. Cloud, FL 34769
TITLE	D
NAME	Harry Yeasel
STREET ADDRESS	5450 Alligator Lake Rd.
CITY-ST-ZIP	St. Cloud, FL 34772
TITLE	D
NAME	Robert A. Fisk
STREET ADDRESS	201 Virginia Ave.
CITY-ST-ZIP	St. Cloud, FL 34769-2435

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Robert A. Fisk

February 27, 2003 407/892-2616

CR2E037B (12/02)