

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # 705993

1. Entity Name

NORTH FORT MYERS LIONS CIVIC CORPORATION, INC.



Principal Place of Business

V.I.P. CENTER, INC
35 S MARIANA AVE
N FT MYERS FL 33903
US

Mailing Address

N. F. M. L. C. C., INC.
P O BOX 3036
N. FT MYERS FL 33918
US



1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6153142

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PANETTIERI, VINCENT A
1214 PONDELLA CIRCLE
NORTH FORT MYERS FL 33917**

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. 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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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: TD
NAME: PANETTIERI, VINCENT A
STREET ADDRESS: 1214 PONDELLA CIRCLE
CITY-ST-ZIP: NORTH FT MYERS FL 33903 ☐ Delete

TITLE: SD
NAME: GARLICK, MORRIS
STREET ADDRESS: 1260 PONDELLA CIRCLE
CITY-ST-ZIP: NORTH FORT MYERS FL 33903 ☐ Delete

TITLE: PD
NAME: BLAKE, ELLA MAE
STREET ADDRESS: 533 SUNSHINE AVE
CITY-ST-ZIP: NORTH FORT MYERS FL 33903 ☐ Delete

TITLE: D
NAME: FISCHER, WILLIAM
STREET ADDRESS: 938 MOODY RD
CITY-ST-ZIP: NORTH FT MYERS FL 33903 ☐ Delete

TITLE: SD
NAME: THOMAS, EVA
STREET ADDRESS: 173 CELESTIAL WAY
CITY-ST-ZIP: NORTH FORT MYERS FL 33903 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition
**U00000644051
03/02/07-80026-014 61.25**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby 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 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 empowerment.

SIGNATURE:

Vincent A. Panettieri

2-20-07 239-995-0843