

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 11, 2006 08:00 AM
Secretary of State**

DOCUMENT # 714683

1. Entity Name
**SPRINGFIELD LIONS CLUB HOLDING CORPORATION,
INC.**



Principal Place of Business
**18 EAST 21ST STREET
JACKSONVILLE, FL 32206**

Mailing Address
**18 EAST 21ST STREET
JACKSONVILLE, FL 32206**



01072008 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
71-4783260

Applied For
Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THOMAS, RANDALL NEIL
3825 SOUTH SAN PABLO ROAD, APT. 201
JACKSONVILLE, FL 32224**

**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 file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	THOMAS, JAMES E
STREET ADDRESS	1332 IDA STREET
CITY-ST-ZIP	JACKSONVILLE, FL 32208
TITLE	PD
NAME	JONES, FRED
STREET ADDRESS	5137 118TH STREET
CITY-ST-ZIP	JACKSONVILLE, FL 32244
TITLE	P
NAME	THOMAS, RANDALL
STREET ADDRESS	2875 SOUTH SAN PABLO ROAD, APT. 201
CITY-ST-ZIP	JACKSONVILLE, FL 32224
TITLE	T
NAME	COOK, DAVID
STREET ADDRESS	85430 DAVID ROAD
CITY-ST-ZIP	YULEE, FL 32097
TITLE	S
NAME	TALAMO, PHILIP
STREET ADDRESS	560 TOWERING PINE DRIVE
CITY-ST-ZIP	JACKSONVILLE, FL 32220
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Randall Thomas* *Randall Thomas*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-06

Date

944-992-7327

Daytime Phone #