

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2008 08:00 AM
Secretary of State

DOCUMENT # 714683 1. Entity Name SPRINGFIELD LIONS CLUB HOLDING CORPORATION, INC.	
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Principal Place of Business 18 EAST 21ST STREET JACKSONVILLE, FL 32206	Mailing Address 18 EAST 21ST STREET JACKSONVILLE, FL 32206
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01132008 No Chg-NP CR2E037 (4/06)

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
3875 SOUTH SAN PABLO RD APT 201
JACKSONVILLE, FL 32224**

DO NOT WRITE IN THIS SPACE

10. 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 renewing) DATE _____

Filing Fee is \$81.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS

TITLE D	NAME THOMAS, JAMES E	STREET/ADDRESS 1332 IDA STREET	CITY/ST/ZIP JACKSONVILLE, FL 32208
TITLE P	NAME THOMAS, RANDALL	STREET/ADDRESS 3875 SOUTH SAN PABLO RD 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
TITLE 	NAME 	STREET/ADDRESS 	CITY/ST/ZIP

DO NOT WRITE IN THIS SPACE

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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 Neil Thomas* **Randall Neil Thomas** **1-13-08** **904-355-7868**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #