

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Mar 09, 1999 8:00 am**  
**Secretary of State**

03-09-1999 90121 042 \*\*\*\*61.25

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**DOCUMENT # 715047**

1. Corporation Name

**BOYS & GIRLS CLUBS OF LAKELAND, INC.**

Principal Place of Business

1525 MARTIN LUTHER KING  
P.O. BOX 763 (LAKELAND, 33802)  
LAKELAND FL 33805  
US

Mailing Address

1525 MARTIN LUTHER KING AVE  
P.O. BOX 763  
LAKELAND FL 33802-7763  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

08/01/1968

4. FEI Number

59-0171815

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

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

9. Name and Address of Current Registered Agent

PERRY, REX  
1525 MARTIN LUTHER KING JR AVE  
LAKELAND FL 33805

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

**REX PERRY, EXECUTIVE DIRECTOR**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME JONES, DAVID  
STREET ADDRESS 803 SYLVAN LANE  
CITY-ST-ZIP PLANT CITY FL 33566

TITLE P ☒ DELETE

NAME MYERS, GREG  
STREET ADDRESS 2014 COUNT COURT  
CITY-ST-ZIP LAKELAND FL

TITLE VST ☐ DELETE

NAME JONES, GUERRY  
STREET ADDRESS 303 KENWITH RD  
CITY-ST-ZIP LAKELAND FL 33803

TITLE D ☐ DELETE

NAME JONES, WILLIAM  
STREET ADDRESS 2303 BUCKINGHAM AVE  
CITY-ST-ZIP LAKELAND FL 33803

TITLE D ☐ DELETE

NAME BARCLAY, DONALD  
STREET ADDRESS 2012 LAKE BENTLEY CRT  
CITY-ST-ZIP LAKELAND FL 33803

TITLE D ☐ DELETE

NAME MCCAUSLAND, TIMOTHY  
STREET ADDRESS 5093 IRONWOOD TRAIL  
CITY-ST-ZIP BARTOW FL 33860

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

P  
PETE SAWYER  
1424 TOMAHAWK TRAIL  
LAKELAND, FL. 33813

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**REX PERRY, EXEC. DIR.**

Date

Daytime Phone #

(941) 686-1719

CR2E037 (11/98)