2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# 725219

Entity Name: SEBRING LIONS CLUB CHARITIES, INC.

Current Principal Place of Business:

1200 FARIMONT DRIVE
SEBRING, FL 33870

New Principal Place of Business:

3400 SEBRING PARKWAY
SEBRING, FL 33870

Current Mailing Address:

1200 FARIMONT DRIVE
SEBRING, FL 33870

New Mailing Address:

3400 SEBRING PARKWAY
SEBRING, FL 33870

FEI Number: 59-1828602 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARCHANT, BECKY
344 RED PINE DRIVE
SEBRING, FL 33871 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	MITCHELL, SOPHY MAE JR	
Address:	1423 CRESENT DRIVE	
City-St-Zip:	SEBRING, FL 33870	
Title:	VP	( ) Delete
Name:	KAHN, AJ BUCKY	
Address:	P.O. BOX 3416	
City-St-Zip:	SEBRING, FL 33871	
Title:	T	( ) Delete
Name:	HENRY, SUE	
Address:	1105 PASASCHEE DRIVE	
City-St-Zip:	SEBRING, FL 33870	
Title:	S	( ) Delete
Name:	MARCHANT, BECKY	
Address:	344 RED PINE DRIVE	
City-St-Zip:	SEBRING, FL 33871	
Title:	D	( ) Delete
Name:	LANKFORD, HENRY	
Address:	4710 BASS AVENUE	
City-St-Zip:	SEBRING, FL 33870	
Title:	D	( ) Delete
Name:	PETERSON, PHILIP	
Address:	3217 MICHIGAN AVENUE	
City-St-Zip:	SEBRING, FL 33872	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AJ BUCKY KAHN P 05/01/2003
Electronic Signature of Signing Officer or Director — Date

PHILIP PETERSON, DIRECTOR
3217 MICHIGAN AVENUE
SEBRING, FL 33872

ANITA HOWES, DIRECTOR
917 FIELDER BLVD
SEBRING, FL 33870

BOB TEDSTONE, SECREATARY
943 SE LAKEVIEW DR
SEBRING, FL 33870

BECKY MARCHANT, TREASURER
344 RED PINE DRIVE
SEBRING, FL 33870

BOB TEDSTONE, VP
943 SE LAKEVIEW DR
SEBRING, FL 33870