

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90020 024 ****70.00

DOCUMENT # 725942

1. Entity Name

MOUNT DORA LIONS CLUB, INC.



Principal Place of Business

7177 SCOTT AVE
TANGERINE FL 32777

Mailing Address

P.O. BOX 131
MOUNT DORA FL 32756



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 397

City & State

City & State

Tangerine FL

Zip

Country

Zip

Country

32777

USA

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-6170030

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

PEZZO, MARY T
7177 SCOTT AVE
TANGERINE FL 32777

Name

Mary T. Pezzo

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

7177 Scott Ave. - P.O. Box 397

City Tangerine, FL

FL

Zip Code

32777

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

Mary T. Pezzo

Signature, typed or printed name of registered agent (must be legible).

(NOTE: Registered Agent signature required when reinstating)

2/5/08

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME PEZZO, MARY T
STREET ADDRESS 7177 SCOTT AVE, P.O. BOX 131
CITY-ST-ZIP TANGERINE FL 32777 ☒ Delete

TITLE Charles Clark
NAME
STREET ADDRESS P.O. Box 1552
CITY-ST-ZIP Tavares, FL 32778 ☒ Change ☐ Addition

TITLE VP
NAME VICTORELLI, MICHELE
STREET ADDRESS 15636 KEZER RD
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

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

TITLE S
NAME BARTELL, JOANN
STREET ADDRESS 5725 OAK ST, P.O. BOX 64
CITY-ST-ZIP TANGERINE FL 32777 ☐ Delete

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

TITLE T
NAME HATCOX, PAUL
STREET ADDRESS 752 EAST ROSEWOOD LANE
CITY-ST-ZIP TAVERS FL 32778 ☒ Delete

TITLE Mary T Pezzo
NAME
STREET ADDRESS P.O. Box 397
CITY-ST-ZIP Tangerine, FL 32777 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
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 empowered.

SIGNATURE:

Mary T. Pezzo

2-5-08

352 735 9629