2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727454

FILED Jan 29, 2012 Secretary of State

Entity Name: UNIVERSITY CITY LIONS CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

3315 N MAIN STREET TERRACE

BOX 459

GAINESVILLE, FL 32602

Current Mailing Address:

New Mailing Address:

GAINESVILLE, FL 32602

3315 N MAIN STREET TERRACE

29 SE 48TH STREET GAINESVILLE, FL 32641

3315 N MAIN STREET TERRACE BOX 459

GAINESVILLE, FL 32602

FEI Number: 59-1773701

FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GORDY, M.L. 3744 NW 7TH PLACE GAINESVILLE, FL 32607 US

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: TREA

 Name:
 JOHNSON, KEVIN

 Address:
 4413 NW 36 TERR

 City-St-Zip:
 GAINESVILLE, FL 32605

Title: PRES

Name: SHULER, SHIRLEY
Address: 29 SE 48TH STREET
City-St-Zip: GAINESVILLE, FL 32641

Title:

Name: KEIRMAN, MILDRED
Address: 13924 NE CTY RD 1471
City-St-Zip: WALDO, FL 32694

Title:

Name: WATSON, ROSEMARIE Address: 3927 NW 31ST TERRACE City-St-Zip: GAINESVILLE, FL 32605

Title: S

Name: CARROLL, BARBARA Address: P O BOX 1280 City-St-Zip: MELROSE, FL 32666

I hereby 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 all other like empowered.

SIGNATURE: SHIRLEY SHULER PRES 01/29/2012