FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 JAN 27 PM 12:30
[illegible] STATE
[illegible] FLORIDA

DOCUMENT # 739970 (2)

1. Corporation Name
THE DUNEDIN LIONS CLUB, INC.

Principal Place of Business	Mailing Address
200 GLENNES LN. #202 PO BOX 834 DUNEDIN FL 34697-0834	200 GLENNES LN. #202 PO BOX NO 834 DUNEDIN FL 34697-0834 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/23/1977
3a. Date of Last Report: 02/16/1994
4. FEI Number: 59-6153464 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $0.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MILLER, CLAIR L
200 GLENNES LN, #202
DUNEDIN FL ~~34697~~ 34698-5920

10. Name and Address of New Registered Agent

81 Name: MILLER, CLAIR L.
82 Street Address (P.O. Box Number is Not Acceptable): 200 GLENNES LN, #202
83: ~~DUNEDIN~~
84 City: DUNEDIN FL 85 Zip Code: 34698-5920

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	PI ☑ Change ☐ Addition
NAME	SCHICK, WALTER	1.2 NAME	SCHICK, WALTER
STREET ADDRESS	3220 US 19 NORTH, Lot #300	1.3 STREET ADDRESS	3220 US 19 LOT #300
CITY-ST-ZIP	CLEARWATER FL 34621	1.4 CITY-ST-ZIP	CLEARWATER, FL 34621
TITLE	~~D~~ S/T	2.1 TITLE	S/T/D ☑ Change ☐ Addition
NAME	MILLER, CLAIR L	2.2 NAME	MILLER, CLAIR L.
STREET ADDRESS	200 GLENNES LN, #202	2.3 STREET ADDRESS	200 GLENNES LN, #202
CITY-ST-ZIP	DUNEDIN, FL ~~00000~~ 34698-5920	2.4 CITY-ST-ZIP	DUNEDIN, FL 34698-5920
TITLE	D	3.1 TITLE	☑ Change ☐ Addition
NAME	~~FRENCH, EDWARD L~~	3.2 NAME	DECEASED
STREET ADDRESS	~~1888 ARGILE DR~~ Deceased	3.3 STREET ADDRESS	
CITY-ST-ZIP	~~DUNEDIN, FL 00000~~	3.4 CITY-ST-ZIP	
TITLE	~~S~~ P	4.1 TITLE	PID ☑ Change ☐ Addition
NAME	MILLER, GEALE	4.2 NAME	MILLER, GEALE H
STREET ADDRESS	200 GLENNES LANE 202	4.3 STREET ADDRESS	200 GLENNES LANE, # 202
CITY-ST-ZIP	DUNEDIN FL 34698-5920	4.4 CITY-ST-ZIP	DUNEDIN, FL 34698-5920
TITLE	~~PT~~	5.1 TITLE	☑ Change ☐ Addition
NAME	~~DODGE, LEE~~	5.2 NAME	no longer a Director
STREET ADDRESS	~~2907 PARKSTEAM AVE.~~	5.3 STREET ADDRESS	
CITY-ST-ZIP	~~CLEARWATER FL~~	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	SCC 1-30-95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Clair R. Millers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Clair L. Miller, CWO-4, USAF (Ret)
200 Glennes Lane, #202
Dunedin, FL 34698-5920

1/13/95 (813)733-1291
Date Daytime Phone #

0088033