

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753273

FILED
Apr 26, 2009
Secretary of State

Entity Name: GULFPORT LIONS, INC.

Current Principal Place of Business:

4630 TIFTON DRIVE, SOUTH
GULFPORT, FL 337110649

New Principal Place of Business:

Current Mailing Address:

4630 TIFTON DRIVE, SOUTH
GULFPORT, FL 337110649

New Mailing Address:

FEI Number: 59-6152780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADULA, ART
2508- 50ST SOUTH
GULFPORT, FL 33707 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: CASE, ROBERT
Address: 2925 CLINTON ST SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: T () Delete
Name: BEUM, JEAN
Address: 3580 38TH AVE S #93
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: S () Delete
Name: PADULA, ART
Address: 2508 50TH ST SOUTH
City-St-Zip: GULFPORT, FL 33707

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JEAN A BEUM

T

04/26/2009

Electronic Signature of Signing Officer or Director

Date