


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2005 8:00 am**  
**Secretary of State**

04-13-2005 90062 050 \*\*\*\*61.25

<b>DOCUMENT # 755659</b> 1. Entity Name <b>LIONS CLUB OF WAUCHULA, INC.</b>					
Principal Place of Business <b>610 W ORANGE ST. WAUCHULA, FL 33873 US</b>			Mailing Address <b>723 HANCHEY RD. WAUCHULA, FL 33873 US</b>		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address <b>c/o PO Box 248</b>			
City & State		City & State <b>WAUCHULA, FL</b>		4. FEI Number <b>59-6151399</b>	
Zip <b>33873</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>ALBRITTON, J. TALMADGE 1586 THOMPSON DR WAUCHULA, FL 33873</b>				7. Name and Address of New Registered Agent Name <b>J. - TALMADGE - ALBRITTON -</b> Street Address (P.O. Box Number is Not Acceptable) <b>723 HANCHEY RD</b> City <b>WAUCHULA</b> <b>FL</b> Zip Code <b>33873</b>	
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 <u><i>J. Talmadge Albritton</i></u> <span style="float: right;">4/11/05</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DURASTANTI, DAVID 610 E JONES ST BOWLING GREEN, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ALBRITTON, J. TALMADGE 723 HANCHEY RD WAUCHULA, FL 33873	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WYSER, LJOE 1033 NE 36 ST FORT MEADE, FL 33841	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALGREEN, EDWARD H. 2073 N. OLIVIA DR AVON PARK, FL 33825	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD ALBRITTON, J. TALMADGE 1586 THOMPSON DR WAUCHULA, FL 33873	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Humphries, K. Joel 3260 Palmer Rd BOWLING GREEN, FL 33834	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <u><i>J. Talmadge Albritton</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4-11-05 863-773-4151 <small>Date Daytime Phone #</small>		