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Mar 03 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 765886 (7)

1. Corporation Name

DANIA LIONS CLUB, INC.

Principal Place of Business

Mailing Address

% RICHARD R. SOBCZAK
224 S. E. 6TH STREET
DANIA FL 33004

% RICHARD R. SOBCZAK
224 S. E. 6TH STREET
DANIA FL 33004

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip 25 Country

28 Zip 29 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/29/1982

4. FEI Number

~~22-7900000~~ 65-0692227

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

SOBCZAK, RICHARD R
224 SE 6TH ST
DANIA FL 33004

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME GOODMAN, MURRY
STREET ADDRESS 415 S. FEDERAL HWY.
CITY-ST-ZIP DANIA FL

TITLE PVD ☐ DELETE
NAME SOBCZAK, RICHARD R
STREET ADDRESS 224 SE 6TH ST
CITY-ST-ZIP DANIA, FL 00000

TITLE SPD ☐ DELETE
NAME MOORE, J. MICHAEL
STREET ADDRESS 1015 NE 18 STREET
CITY-ST-ZIP FT LAUDERDALE FL 33305

TITLE VD ☐ DELETE
NAME WINTHERS, WILLIAM
STREET ADDRESS 7975 S.W. 28TH AVE.
CITY-ST-ZIP FT. LAUDERDALE FL 33312

TITLE PD ☐ DELETE
NAME EDMOND, LODGE
STREET ADDRESS 4879 S.W. 28TH TERRACE
CITY-ST-ZIP FT. LAUDERDALE FL 33312

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 incorporator 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 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL J. MOORE

11/18/98

954-924-1335

CR2E037 (10/97)