

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90364 049 ****61.25

DOCUMENT # N00000000295					
1. Entity Name PALM HARBOR II LIONS FOUNDATION, INC.					
Principal Place of Business 2790 SUNSET POINT ROAD CLEARWATER, FL 33759			Mailing Address PALM HARBOR II LIONS FOUNDATION PO BOX 375 PALM HARBOR, FL 34682		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3625050	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAIR, STEVEN W ESQ 2790 SUNSET POINT ROAD CLEARWATER, FL 33759				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
FL				Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1PP <input checked="" type="checkbox"/> Delete CONSOLINO, JOHN 186 ARBOR DR. E. PALM HARBOR, FL 34683				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	IPP <input checked="" type="checkbox"/> Delete GLORIA, BOYAN 1036 DARTFORD DR TARPON SPRINGS, FL 34689				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1V <input checked="" type="checkbox"/> Delete DOMINICK, MICHAEL 1051 DARTFORD DR TARPON SPRINGS, FL 34689				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <input checked="" type="checkbox"/> Delete LYNCH, JAMES 1257 TAYLOR AVE DUNEDIN, FL 34698				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T <input checked="" type="checkbox"/> Delete SPEED, DAVID 2473 INDIAN TRAILS WEST PALM HARBOR, FL 34683				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	2V <input checked="" type="checkbox"/> Delete REGENAUER, JOAN 7819 ADELAIDE LOOP NEW PORT RICHEY, FL 34655				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Glenn Hooker 1715 MacDonnell Dr Palm Harbor FL 34684			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		First Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition John Consolino 286 Arbor Dr E Palm Harbor FL 34683			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Second Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Richard T Kearns 795 County Rte 1, #14 Palm Harbor FL 34683			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Greg Alvord 1001 Cardigan Lane Palm Harbor FL 34683			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Carl G Davis 1659 El Tair Trail Clearwater FL 33765			
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 exemptions contained 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 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>Carl G Davis</u> <u>Carl G Davis</u> <u>4-22-08</u> <u>727-725-9959</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					