


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90022 036 ****61.25

DOCUMENT # N00000003697			
1. Entity Name THE LEHIGH ACRES LIONS FOUNDATION, INC.			
Principal Place of Business 9721 MAPLE CREST CIRCLE LEHIGH ACRES FL 33936		Mailing Address 9721 MAPLE CREST CIRCLE LEHIGH ACRES FL 33936	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country USA	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 65-1013857		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COYNE, ROBERT 1505 MARKDALE STREET LEHIGH ACRES FL 33936		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:  (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDERSON, WESLEY 2602 6TH STREET LEHIGH ACRES FL 33936 <i>Spelling correction →</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Andersen, Wesley 2602 6th street Lehigh Acres, FL 33936
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V1 GIBBS, JOHN 112 COLUMBUS AVE LEHIGH ACRES FL 33936	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V2 COMPTON, DOUGLAS 1431 ARCHER LEHIGH ACRES FL 33936	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRAHER, DELORES 9721 MAPLECREST CIRCLE LEHIGH ACRES FL 33936 <i>Spelling correction →</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dolores Frehner 9721 Maplecrest Circle Lehigh Acres, FL 33936
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HEMINGWAY, RALPH JR. 622 MORNINGMIST LANE LEHIGH ACRES FL 33936	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATHELLY, CHARLES 416 N RICHMOND AVE LEHIGH ACRES FL 33971 <i>Address + Spelling correction</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Matheny, Charles 416 2212 Gardenia Way Lehigh Acres, FL 33972

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:  2/4/04 239-369-9740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #