2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002672

Entity Name: THE PONCE INLET LIONS FOUNDATION, INC.

FILED May 27, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

4670 S. PENINSULA DRIVE PONCE INLET, FL 32127

Current Mailing Address: New Mailing Address:

951 E SOUTH LAKEWOOD TERRACE 19 BUCKINGHAM DR

PONCE INLET, FL 32127 ORMOND BEACH, FL 32176 US

FEI Number: 59-3719032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIRACUSA, RAY 951 SOUTH LAKEWOOD TERRACE PORT ORANGE, FL 32127

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

1VP (X) Change () Addition () Delete

SIRACUSA, RAY BALDWIN, MICHAEL P.S. Name: Name: Address: 951 E SOUTH LAKEWOOD TERRACE Address: 19 BUCKINGHAM DR

City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: ORMOND BEACH, FL 32176 US

() Delete Title: Title: (X) Change () Addition

KEEL, NORWOOD S Name: Name: DE MARIA, DOMENICK D Address: 1 KELLY BEA COURT Address: 799 PHEASANT RUN CT City-St-Zip: PONCE INLET, FL 32127 City-St-Zip: PORT ORANGE, FL 32127 US

Title: () Delete Title: (X) Change () Addition

HINSON, THOMAS DAUKSIS, WILLIAM D Name: Name: 4745 S ATLANTIC AVE, # 405 91 JENNIFER CIRCLE Address: Address: City-St-Zip: PORT ORANGE, FL 321277134 City-St-Zip: PONCE INLET, FL 32127 US

Title: () Delete Title: (X) Change () Addition

BALDWIN, MICHAEL P Name: Name: GRASSO, JOSEPH D 19 BUCKINGHAM DRIVE 70 BUSCHMAN DR Address: Address:

City-St-Zip: ORMOND BEACH, FL 321762801 City-St-Zip: PONCE INLET, FL 32127 US

Title: () Delete Title: (X) Change () Addition WAYNE, OLIVE SPITZFADEN, CHARLES D Name: Name:

8 KELLY BEA COURT 48 POMPANO DR Address: Address:

City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PONCE INLET, FL 32127 US

Title: (X) Delete Title: () Change () Addition

BALDWIN, MARIA Name: Name: Address: 19 BUCKINGHAM DRIVE Address: ORMOND BEACH, FL 321762801 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL P. BALDWIN S 05/27/2006