

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90383 012 ****61.25

DOCUMENT # NO1000002931

1. Entity Name
DAYTONA BEACH LIONS CLUB, INC.



Principal Place of Business
**345 WHITE STREET
DAYTONA BEACH FL 32114**

Mailing Address
**345 WHITE STREET
DAYTONA BEACH FL 32114**

11038889



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3724331**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HALL, MARK R ESQ
124 FAULKNER STREET
NEW SMYRNA BEACH FL 32168**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE \$61.25

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	P	<input type="checkbox"/> Delete
NAME	MANTHEY, ROBERT	
STREET ADDRESS	405 PELICAN DR.	
CITY-ST-ZIP	DAYTONA BEACH FL 32119	
TITLE	ST	<input type="checkbox"/> Delete
NAME	NEEDHAM, HAROLD W	
STREET ADDRESS	30 DEASY W BLVD #703	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	BOD	<input type="checkbox"/> Delete
NAME	KNESS, HERNY	
STREET ADDRESS	1404 YEARLING TRAIL	
CITY-ST-ZIP	DAYTONA BEACH FL 32119	
TITLE	BOD	<input type="checkbox"/> Delete
NAME	SPECH, ENGINE	
STREET ADDRESS	6124 DEL MAR DR.	
CITY-ST-ZIP	PORT ORANGE FL 32127	
TITLE	BOD	<input checked="" type="checkbox"/> Delete
NAME	PHAUEUT, RUTH	
STREET ADDRESS	1250 BLL TARONE	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Pres	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ruth Phazeut	
STREET ADDRESS	1250 Bill Tarone	
CITY-ST-ZIP	Ormond Beach, FL 32174	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3 oceans w. Blvd. # 7D3	
STREET ADDRESS	Daytona Beach, FL 32118	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	outgoing Pres	
STREET ADDRESS	Robert Manthey	
CITY-ST-ZIP	405 Pelican Dr.	
	D. B. FL 32119	

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: HAROLD W NEEDHAM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(386) 761-7832

CR2E037 (10/02)