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Jan 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01273 (4)

1. Corporation Name

LIONS CLUB OF OLDSMAR, INC.

Principal Place of Business

Mailing Address

2418 DANA DRIVE
SAFETY HARBOR FL 34695
USP.O. BOX 1061
OLDSMAR FL 34677-00183. Date Incorporated or Qualified
02/07/19843a. Date of Last Report
03/19/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOUGLAS, JOHN W
2418 DANA DRIVE
SAFETY HARBOR FL 34695

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY - ST - ZIP |
|-------|----------------|----------------------|------------------|-----------|----------|--------------------|---------------------|
| T | DOUGLAS, JOHN | 2418 DANA DRIVE | SAFETY HARBOR FL | | | | |
| V | SMITHER, JOHN | 313 FAIRWOOD CT | OLDSMAR FL | | | | |
| D | LEE, COY | 918 STATE STREET | OLDSMAR FL | | | | |
| P | CLUTE, DALE | 814 JACARANDA | OLDSMAR FL | | | | |
| D | CAMPOLI, JAMES | 313 EAST SHORE DRIVE | OLDSMAR FL | | | | |

14. I do 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 receiver 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 if changed, or on an attachment with an address.

SIGNATURE:

JOHN W. DOUGLAS 1/20/97 813-796-6880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0068475

CP2E037 (9/96)