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03-11-1999 90129 042 ****61.25

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01273

1. Corporation Name

LIONS CLUB OF OLDSMAR, INC.

Principal Place of Business

2418 DANA DRIVE
SAFETY HARBOR FL 34695
US

Mailing Address

P.O. BOX 1051
OLDSMAR FL 34677



2. Principal Place of Business

21 3014 PEPPERWOOD LN. W.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

CLEARWATER, FL.

28 City & State

24 Zip 33761 25 Country USA

29 Zip 30 Country

3. Date Incorporated or Qualified

02/07/1984

4. FEI Number

59-1612490

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

DOUGLAS, JOHN W
2418 DANA DRIVE
SAFETY HARBOR FL 34695

10. Name and Address of New Registered Agent

81 Name JOHN W. DOUGLAS
82 Street Address (P.O. Box Number is Not Acceptable)
3014 PEPPERWOOD LN. W.
83
84 City CLEARWATER FL 85 Zip Code 33761

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

TITLE	D	DELETE
NAME	PORCELLI, DOROTHY	
STREET ADDRESS	3113 SR 580 #415	
CITY-ST-ZIP	SAFETY HARBOR FL 34695	
TITLE	D	DELETE
NAME	JUDY, PAUL	
STREET ADDRESS	920 WAVERLY ST	
CITY-ST-ZIP	OLDSMAR FL 34677	
TITLE	D	DELETE
NAME	FARMER, ROWENA	
STREET ADDRESS	264 PELICAN DR. NORTH	
CITY-ST-ZIP	OLDSMAR FL 34677	
TITLE	P	DELETE
NAME	PORCELLI, JOSEPH	
STREET ADDRESS	3113 SR 580 #415	
CITY-ST-ZIP	SAFETY HARBOR FL 34695	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE:

J. L. W. DOUGLAS, JR. - TREAS. - 3/9/99 727-796-6880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)