2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 17, 2005
Secretary of State

DOCUMENT# N01417

Entity Name: ENGLEWOOD LIONS CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

4611 PLACIDA RD.
P.O. BOX 5251
ENGLEWOOD, FL 34224 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 5251
ENGLEWOOD, FL 342245251 US

New Mailing Address:

FEI Number: 65-0526380 **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:

MILLER, GARY D.
9371 HEARTWELLVILLE AVE
ENGLEWOOD, FL 34224 US

Name and Address of New Registered Agent:

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: GARY D. MILLER
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	BEERS, LARRY W	
Address:	8080 CASA DE MEADOWS DR.	
City-St-Zip:	ENGLEWOOD, FL 342249509	
Title:	T	( ) Delete
Name:	MILLER, GARY D.,	
Address:	9371 HEARTWELLVILLE AVE.	
City-St-Zip:	ENGLEWOOD, FL	
Title:	D	( ) Delete
Name:	WILDE, ALBERT	
Address:	6601 GASPARILLA PINES BLVD.	
City-St-Zip:	ENGLEWOOD, FL 34224	
Title:	P	( ) Delete
Name:	MASON, HERBERT	
Address:	7220 QUARRY ST.	
City-St-Zip:	ENGLEWOOD, FL 34224	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY D. MILLER T 10/17/2005
Electronic Signature of Signing Officer or Director — Date