

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01417

FILED
Jan 13, 2009
Secretary of State

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:

4611 PLACIDA RD.
ENGLEWOOD, FL 34224 US

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 ()**

Name and Address of Current Registered Agent:

DOUCETTE, SHEILA
7403 EBRO RD
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BEERS, LARRY W
Address: 8080 CASA DE MEADOWS DR.
City-St-Zip: ENGLEWOOD, FL 342249509

Title: T () Delete
Name: DOUCHETTE, SHEILA
Address: 7403 EBRO RD.
City-St-Zip: ENGLEWOOD, FL 34224

Title: P () Delete
Name: OSTROWSKI, MADELINE
Address: 3364 HOLCOMB RD.
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change () Addition
Name: NIESKES, SANDRA
Address: 57 WINDSOR DRIVE
City-St-Zip: ENGLEWOOD, FL 34223

I hereby certify that the information supplied with this filing does not qualify 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: LARRY W BEERS

S

01/13/2009

Electronic Signature of Signing Officer or Director

Date