2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2008 8:00 am
Secretary of State
07-15-2008 90063 031 ****70.00

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1. Entity Name
THE INVERNESS LIONS FOUNDATION, INC.

Principal Place of Business	Mailing Address
130 HEIGHTS AVE INVERNESS, FL 34452	PO BOX 295 INVERNESS, FL 34451

07052008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 02-0668972 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CLOWARD, GEORGE L
5189 SO ROBERT BLAKE AVE
INVERNESS, FL 34452

7. Name and Address of New Registered Agent

Name: Janet Sue Cohen
Street Address (P.O. Box Number is Not Acceptable): 854 W. Gleason Pl.
City: Beverly Hills, FL 34465
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: Janet Sue Cohen Janet Sue Cohen 7/13/08
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 12, 2008

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P MEYERS, JOHN 2 S. DESOTO ST BEVERLY HILLS, FL 34465	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gendron Madeleine 208 N Citrus Inverness Fl 34452	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ANDREICHUK, GREGORY 1112 E. BUCKNELL AVE INVERNESS, FL 34450	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Pelletier Monique 1375 Dovekie Terr Inverness Fl 34450	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GARDENS, PATRICIA 9291 SANDPIPER DRIVE INVERNESS, FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Janet Sue Cohen 854 W. Gleason Pl Beverly Hills Fl 34465	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHIBLEY, BARBARA 943 HICHORY AVE INVERNESS, FL 34452	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Peacock, Judith 1201 N. Cherry Pop Hernando Fl 34445	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KARNES, DORIS 811 LONGFELLOW INVERNESS, FL 34450	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Robinson Shirley 3052 E Brigadoon Inverness Fl 34445	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Janet Sue Cohen Janet S. Cohen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #