2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# N03000003073

Entity Name: THE SUN CITY CENTER LIONS FOUNDATION, INC.

Current Principal Place of Business:

P. O. BOX 5684
SUN CITY CENTER, FL 335715684

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 5684
SUN CITY CENTER, FL 335715684

New Mailing Address:

FEI Number: 27-0052938 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LLOYD, CARLTON D
335 CLUB MANOR DR.
SUN CITY CENTER, FL 33573 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: D ( ) Delete
Name: MCGOVERN, RICHARD T
Address: 2101 SCRUB JAY PL.
City-St-Zip: RUSKIN, FL 33570

Title: D ( ) Delete
Name: LLOYD, CARLTON D
Address: 335 CLUB MANOR DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D ( ) Delete
Name: DUNNINGTON, EILEEN
Address: 1602 POPLAR GLEN CT
City-St-Zip: SUN CITY CENTER, FL 33573

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MCGOVERN, RICHARD T
Address: 1822 DEL WEBB BLVD E
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Change ( ) Addition
Name: LLOYD, CARLTON D
Address: 1505 WEATHERFORD DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D (X) Change ( ) Addition
Name: CHAMBERS, MARGIE
Address: 2305 GRENOBLE PL
City-St-Zip: SUN CITY CENTER, FL 33573

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: CARLTON DAVID LLOYD SEC 04/27/2007

Electronic Signature of Signing Officer or Director — Date