## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003073

FILED Apr 10, 2009 Secretary of State

Entity Nai	me: THE SUI	N CITY CE	ENTER LIONS FOUNI	DATION, INC.			
Current Principal Place of Business:				New Principal Place of Business:			
P. O. BOX 5684 SUN CITY CENTER, FL 335715684			84	1505 WEATHERFORD DRIVE SUN CITY CENTER, FL 335715684			
Current Mailing Address:				New Mailing Address:			
P. O. BOX SUN CITY	5684 CENTER, FL	33571568	84				
FEI Number	: 27-0052938	FEI Num	nber Applied For()	FEI Number Not Applicab	able ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Ad	Name and Address of New Registered Agent:		
335 CLÙB SUN CITY The above	ARLTON D MANOR DR. CENTER, FL named entity of Florida.		US nis statement for the p	urpose of changing its re	registered office or registered agent, or both,		
SIGNATUI							
		nic Signatı	ure of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:				ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D ( MCGOVERN, I 1822 DEL WE SUN CITY CEN	BB BLVD E	3573	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D ( LLOYD, CARL 1505 WEATHE SUN CITY CEN	ERFORD DR		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title:	D (						

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: MARGIE CHAMBERS TREA 04/10/2009