

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008828

FILED
Mar 06, 2009
Secretary of State

Entity Name: THE ROCKLEDGE LIONS FOUNDATION, INC.

Current Principal Place of Business:

JAMES E. RUTH
1149 LUTHER DR
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 56-0313
ROCKLEDGE, FL 329560313

New Mailing Address:

FEI Number: 71-0952640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARMAN, JOHNNY
342 PAPAYA CIRCLE
BAREFOOT BAY, FL 32976 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: LYNN, SHIRLEY
Address: 1107 MOUNTCLAIR RD
City-St-Zip: COCOA, FL 329226353

Title: D () Delete
Name: JARVIS, KEVIN
Address: 1680 BRIDGEPORT CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

Title: D () Delete
Name: PARKER, AL
Address: 2934 MATTHEW DR
City-St-Zip: ROCKLEDGE, FL 32955

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:

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: JOHNNY GARMAN

LION

03/06/2009

Electronic Signature of Signing Officer or Director

Date