

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 14, 2003 8:00 am
Secretary of State

03-14-2003 90054 014 ****61.25

DOCUMENT # N03361

1. Entity Name

TOWN AND COUNTRY LIONS CLUB, INC.



Principal Place of Business

**% DUANE E. GROSE
354 GREGORY ROAD
WEST PALM BEACH FL 33405-4910**

Mailing Address

**% DUANE E. GROSE
354 GREGORY ROAD
WEST PALM BEACH FL 33405-4910**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6169864**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GROSE, DUANE E
354 GREGORY ROAD
WEST PALM BEACH FL 33405-4910**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
P	LOVENESS, WAYNE H	262 WALKER AVE #1	LAKE WORTH FL 33463	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	LOVELESS, JUDY	262 WALKER AVE #1	LAKE WORTH FL 33463	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
TD	WILSON, BETTE S	3553 N. LIBBY DR	WEST PALM BEACH FL 33415	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VP	WINTER, JOYCE	3571 N LIBBY DRIVE	WEST PALM BEACH FL 33406	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	BRINKMAN, PAUL	6858 OSBORNE DR	LANTANA FL 33462	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	ADAMKO, ED	47 ANDROS RD	PALM SPRINGS FL 33461	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED DUANE E. GROSE 08/09/03 601-505-3629

CP2E037 (10/02)