

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000006426

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** THE LIONS OF DISTRICT 35-D HEARING PROGRAM, INC.

**Current Principal Place of Business:**

342 PAPAYA CIR  
BAREFOOT BAY, FL 329766851

**New Principal Place of Business:**

**Current Mailing Address:**

342 PAPAYA CIR  
BAREFOOT BAY, FL 32976

**New Mailing Address:**

342 PAPAYA CIR  
BAREFOOT BAY, FL 329766851

**FEI Number:** 81-0651756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GARMAN, ROBERT G  
342 PAPAYA CIR  
BAREFOOT BAY, FL 329766851 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:** PRES  
**Name:** GARMAN, JOHNNY  
**Address:** 342 PAPAYA CIR  
**City-St-Zip:** BAREFOOT BAY, FL 32976

**Title:** D  
**Name:** RUTH, JIM  
**Address:** 1149 LUTHER DR  
**City-St-Zip:** ROCKLEDGE, FL 32955

**Title:** SEC.  
**Name:** JARVIS, KEVIN  
**Address:** 1680 BRIDGEPORT CIRCLE  
**City-St-Zip:** ROCKLEDGE, FL 32955

I hereby 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 all other like empowered.

**SIGNATURE:** JOHNNY GARMAN

PRES

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date