

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002631

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: OCALA SOUTHWEST LIONS CLUB, INC.

## Current Principal Place of Business:

CHAMPIONS RESTAURANT  
OCALA, FL 34474

## New Principal Place of Business:

MASON JAR RESTAURANT  
OCALA, FL 34481

## Current Mailing Address:

OCALA SOUTHWEST LIONS CLUB  
P O BOX 772771  
OCALA, FL 34477

## New Mailing Address:

FEI Number: 51-0541280      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOCKUS, LEONARD  
6384 SW 111TH PLACE  
OCALA, FL 34476      US

## Name and Address of New Registered Agent:

COUILLARD, TERRANCE  
8415 SW 101 PL RD  
OCALA, FL 34481      US

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: TERRANCE COUILLARD

04/15/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: COUILLARD, TERRY  
Address: 10972 SW 86TH CT  
City-St-Zip: DUNNELLON, FL 34432

Title: 1V      ( ) Delete  
Name: GOLDSTEIN, ROBERT  
Address: 5780 SW 84TH ST  
City-St-Zip: OCALA, FL 34476

Title: S      ( ) Delete  
Name: PRINE, KERRY  
Address: 16260 SW 24TH PL  
City-St-Zip: OCALA, FL 34481

Title: T      ( ) Delete  
Name: HAAS, RICHARD  
Address: 7024 SW 93RD ST RD  
City-St-Zip: OCALA, FL 34476

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P      (X) Change ( ) Addition  
Name: COUILLARD, TERRANCE  
Address: 8416 SW 101 PLACE RD  
City-St-Zip: OCALA, FL 34481

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S      (X) Change ( ) Addition  
Name: WELCH, GWENN  
Address: 8415 SW 101 PL RD  
City-St-Zip: OCALA, FL 34481

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: TERRANCE COUILLARD

PRES

04/15/2009

Electronic Signature of Signing Officer or Director

Date