

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006394

FILED
Jan 21, 2009
Secretary of State

Entity Name: THE KISSIMMEE LIONS CLUB, INC.

Current Principal Place of Business:

PO BOX 453251
KISSIMMEE, FL 347443251

New Principal Place of Business:

3050 LIONS CT
KISSIMMEE, FL 34745

Current Mailing Address:

PO BOX 453251
KISSIMMEE, FL 347443251

New Mailing Address:

PO BOX 453251
KISSIMMEE, FL 347453251

FEI Number: 20-4850882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALEY, JOHN E
601 OLEANDER LANE
KISSIMMEE, FL 347445253 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: P () Delete
Name: PARMENT, CLAUDIA
Address: 1635 PARKGATE DR
City-St-Zip: KISSIMMEE, FL 34746

Title: V () Delete
Name: BRENNEN, BILL
Address: 131 PRIMA DR
City-St-Zip: KISSIMMEE, FL 34759

Title: T () Delete
Name: MORLEY, AL
Address: 11518 LAKE WILLIS DR.
City-St-Zip: KISSIMMEE, FL 34741

Title: S () Delete
Name: BRANNAMAN, PHYLLIS
Address: 1055 W. TROPICANA CT.
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: VALDES, LORRAINE
Address: 390 BALBOA DR
City-St-Zip: KISSIMMEE, FL 34759

Title: D () Delete
Name: HALEY, JOHN
Address: 601 OLEANDER LANE
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRITTINGHAM, LEE
Address: 511 BROWN BEAR WAY
City-St-Zip: ST. CLOUD, FL 34772

Title: V (X) Change () Addition
Name: CAUSSADE, EUNICE
Address: 3450 OAK MILL DR
City-St-Zip: KISSIMMEE, FL 34744

Title: T (X) Change () Addition
Name: MORLEY, AL
Address: 11518 LAKE WILLIS DR.
City-St-Zip: ORLANDO, FL 328219309

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

Title: D (X) Change () Addition
Name: DURRANCE, ELAINE
Address: 8001 CAROLINA LN
City-St-Zip: ORLANDO, FL 32825

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: JOHN HALEY

RA

01/21/2009

Electronic Signature of Signing Officer or Director

Date