2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N06000008192

Entity Name: THE SOUTH MARION LIONS FOUNDATION, INC.

Current Principal Place of Business:

11856 SE 176TH PL RD
SUMMERFIELD, FL 34491

New Principal Place of Business:

Current Mailing Address:

11856 SE 176TH PL RD
SUMMERFIELD, FL 34491

New Mailing Address:

FEI Number: 20-5229866 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARRIS, ANTHONY J R
11856 SE 176TH PL RD
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

FARRIS, ANTHONY
11856 SE 176TH PL RD
SUMMERFIELD, FL 34491 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: ANTHONY FARRIS 04/06/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FARRIS, DELORES C
Address: 11856 SE 176TH PL RD
City-St-Zip: SUMMERFIELD, FL 34491

Title: D ( ) Delete
Name: WESTERFELD, LEON
Address: 13805 DEL WEB BLVD.
City-St-Zip: SUMMERFIELD, FL 34491

Title: D ( ) Delete
Name: WOODS, JUANITA
Address: 4111 SE 10TH PL.
City-St-Zip: OCALA, FL 34491

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: D ( ) Change (X) Addition
Name: FARRIS, ANTHONY
Address: 11856 SE 176TH PL. RD.
City-St-Zip: SUMMERFIELD, FL 34491

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: DELORES FARRIS P 04/06/2009
Electronic Signature of Signing Officer or Director Date