

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 05, 2005  
Secretary of State

DOCUMENT# N06608

Entity Name: ORANGE CITY LIONS CLUB, INC.

## Current Principal Place of Business:

<UNUSED>  
P O BOX 740098  
ORANGE CITY, FL 32763

## New Principal Place of Business:

200 W. GRAVES AVE.  
ORANGE CITY, FL 32763

## Current Mailing Address:

200 W. GRAVES AVE.  
P O BOX 740098  
ORANGE CITY, FL 32774

## New Mailing Address:

200 W. GRAVES AVE.  
P O BOX 740098  
ORANGE CITY, FL 327740098

FEI Number: 59-6153479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DELOSSO, VINCENT JR.  
1709 CONCERT RD.  
DELTONA, FL 32738 US

## Name and Address of New Registered Agent:

VINCENT DELOSSO JR  
1709 CONCERT RD.  
DELTONA, FL 327384043 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: VINCENT DELOSSO JR

04/05/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FERRARO, PETER PD  
Address: 2461 ALBURY AVE.  
City-St-Zip: DELTONA, FL 32738

Title: S ( ) Delete  
Name: SCHAUER, LORENZ T  
Address: 1555 BLUE SPRINGS AVE  
City-St-Zip: ORANGE CITY, FL

Title: D ( ) Delete  
Name: MADEWELL, DARRYL R  
Address: 2843 ARBOUR TRAIL COURT  
City-St-Zip: DELTONA, FL 32725

Title: TD ( ) Delete  
Name: DELOSSO, VINCENT, JR.,  
Address: 1709 CONCERT ROAD  
City-St-Zip: DELTONA, FL 32738

Title: D ( ) Delete  
Name: REDA, DOMINICK  
Address: 2461 SHEFFIELD DR.  
City-St-Zip: DELTONA, FL 32738

Title: D ( ) Delete  
Name: LUCAS, ARTHUR  
Address: 21902 CLEMATIS WAY  
City-St-Zip: DAYTONA BEACH, FL 32124

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: SCHAUER, LORENZ T  
Address: 1555 BLUE SPRINGS AVE  
City-St-Zip: ORANGE CITY, FL

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VINCENT DELOSSO JR

TD

04/05/2005

Electronic Signature of Signing Officer or Director

Date