

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2008
Secretary of State

DOCUMENT# N06608

Entity Name: ORANGE CITY LIONS CLUB, INC.

Current Principal Place of Business:

200 W GRAVES AVE
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: 59-6153479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VINCENT DELOSSO JR
1707 CONCERT RD.
DELTONA, FL 327384043 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: PD () Delete
Name: MADEWELL, DARRYL R
Address: 1709 CONCERT RD
City-St-Zip: DELTONA, FL 32738

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

Title: D () Delete
Name: FERRARO, PETER
Address: 1420 MCGREGOR RD
City-St-Zip: DELAND, FL 32720

Title: TD () Delete
Name: DELOSSO, VINCENT, JR, .
Address: 1707 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 (X) Delete
Name: ZAMBUTO, SALVATORE
Address: 2444 SCOTTSVILLE AVE.
City-St-Zip: DELTONA, FL 32725

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:

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City-St-Zip:

Title: () Change () Addition
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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 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: DELOSSO, VINCENT, JR.

TD

03/04/2008

Electronic Signature of Signing Officer or Director

Date