

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06790

**FILED**  
**Nov 21, 2013**  
**Secretary of State**

**Entity Name:** VENICE LIONS CLUB, INC.

**Current Principal Place of Business:**

1289 JACARANDA BOULEVARD  
VENICE, FL 342924522 US

**New Principal Place of Business:**

**Current Mailing Address:**

1289 JACARANDA BOULEVARD  
VENICE, FL 342925422 US

**New Mailing Address:**

**FEI Number:** 23-7215449

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KORP, WILLIAM R  
333 S. TAMiami TRAIL  
VENICE, FL 34285 US

**Name and Address of New Registered Agent:**

FLYNN, BEVERLY S  
1289 JACARANDA BLVD  
VENICE, FL 342924522 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: BEVERLY S FLYNN

11/21/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: FLYNN, BEVERLY  
Address: 3669 ELKREM AVE  
City-St-Zip: NORTH PORT, FL 34286

Title: D  
Name: MCGILLICUDDY, BARBARA  
Address: 744 WHITE PINE TREE RD #212  
City-St-Zip: VENICE, FL 34285

Title: TD  
Name: MATTSON, DAVID  
Address: 355 CYPRESS RD  
City-St-Zip: VENICE, FL 34293

Title: TD  
Name: KIRKEENG, ALF E  
Address: 1260 COVEY CT  
City-St-Zip: VENICE, FL 34293

I hereby 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 all other like empowered.

SIGNATURE: BEVERLY S FLYNN

S

11/21/2013

Electronic Signature of Signing Officer or Director

Date