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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N11125** (4)

1. Corporation Name

VENICE LIONS CLUB FOUNDATION, INC.

Principal Place of Business	Mailing Address
PO BOX 863 VENICE FL 34284 US	PO BOX 863 VENICE FL 34284 US

3. Date Incorporated or Qualified: 09/17/1985

4. FEI Number: 59-2583544 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1289Jacaranda Boulevard	26 1289 Jacaranda Boulevard
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Venice, FL 34292-4522	City & State 28 Venice, FL 34292-4522
Zip / Country 24 34292-4522 / 25 USA	Zip / Country 29 34292-4522 / 30 USA

9. Name and Address of Current Registered Agent

KORP, WILLIAM R., ESQ.
333 S. TAMIAMI TRAIL
VENICE FL 34285

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STARNER, CLAIR 1000 BECKLEY CIR VENICE FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P Ashworth, Johnny 960 Jamica RD Venice, FL 34293	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KRUGER, BEVERLY A. 1302 MANGO AVE. VENICE FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	S/D Bohan, John 72 Winsdor DR Englewood, FL 34223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEPHENSON, P. DEE MD 616 VALENCCIA RD VENICE FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T KIRKEENG, ALF E. 1260 COVEY COURT VENICE FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOWERY, CHARLES E. 16 STONE MOUNTAIN BLVD ENGLEWOOD FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARTORANA, THOMAS J. 102 CAPRI ISLES BLVD. APT 102 VENICE FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D Lynch, Edward 760 Bird Bay DR W. Venice, FL 34292	☐ Change ☒ Addition

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] D Johnny Ashworth 1/15/98 941-4935191