

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90089 045 ****61.25

DOCUMENT # N14716

1. Entity Name

RIBAUT LIONS CLUB HOLDING CORPORATION



Principal Place of Business

**2040 RIVERVIEW ST.
JACKSONVILLE FL 32208
US**

Mailing Address

**P.O. BOX 9441
JACKSONVILLE FL 32208-9441
US**



2. Principal Place of Business

1436 Bellshore Circle

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 9441

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-6152437

Applied For

Not Applicable

Zip

32218

Country

DUVAL

Zip

32208

Country

DUVAL

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DUGGER, AZALEE --
1436 BELLSHORE CIR
JACKSONVILLE FL 32218**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Azalee Dugger

Azalee Dugger, President

April 4, 2006

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P DUGGER, AZALEE**
STREET ADDRESS **1436 BELLSHORE CIR**
CITY-ST-ZIP **JACKSONVILLE FL 32218**

TITLE ☐ Delete
NAME **T KELLEY, KATHERINE**
STREET ADDRESS **515 EAST 61ST STREET**
CITY-ST-ZIP **JACKSONVILLE FL 32208**

TITLE ☐ Delete
NAME **S MORRIS, MARIE**
STREET ADDRESS **8232 WHITE PLAINS RD**
CITY-ST-ZIP **JACKSONVILLE FL 32208**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Azalee Dugger, President

April 4, 2006