

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90020 047 ****61.25

DOCUMENT # N20273 1. Entity Name FORT LAUDERDALE LIONS CLUB, INC.					
Principal Place of Business C/O STEPHEN B ROSENTHAL 8142 NO UNIVERSITY DR TAMARAC, FL 33321 US			Mailing Address 8142 N. UNIVERSITY DR. TAMARAC, FL 33321 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-6170009	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent ROSENTHAL STEPHEN B ESQ 8142 N UNIVERSITY DR TAMARAC, FL 33321				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRAUSS, JIM 1528 NW 4 AVE FT LAUDERDALE, FL		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Brauss, Ora Map 3628 SW 23rd St FT, Lauderdale, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANE, SAMUEL R 10821 NW 6TH ST PLANTATION, FL 33324		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAUSS, ROBERT 3628 SW 23RD CT FORT LAUDERDALE, FL 33312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Brauss, Robert 3628 SW 23rd Ct FT, Lauderdale, FL 33312	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAM, LORRIE 5240 S.W. 26 AVE FT. LAUDERDALE, FL 33312		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SKINNER, SELWYN 17451 SW 33RD ST MIRAMAR, FL 33025		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SKINNER, Selwyn 17451 SW 33rd St Miramar, FL 33025 (Director)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOWLAND, DIANE 8132 SO CORAL CIRCLE N LAUDERDALE, FL 33068		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. 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 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: <u>Ora Map Brauss</u> Treasurer 3/08/2004 9547646906 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					