2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23318

FILED Jan 16, 2009 Secretary of State

Entity Name: ARLINGTON LIONS CLUB HOLDING CORPORATION

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
523 COM	ON LIONS CLUB I IMERCE STREET IVILLE, FL 32211					
	lailing Address:		New Mailir	ng Address:		
ARI INGTO		HOLDING CORP.				
523 COM	IMERCE STREET VILLE, FL 32211	Γ				
El Number:	: 59-1850939 I	FEI Number Applied For()	FEI Number Not Appli	cable () Certificate of Status Desired ()		
lame and	Address of Cur	rent Registered Agent:	Name and	Address of New Registered Agent:		
'812 BLAK	MCLANAHAN KE FORD WILL LI VILLE, FL 32256					
	named entity sub of Florida.	omits this statement for the p	urpose of changing it	s registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electronic	Signature of Registered Age	ent	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
itle: lame: .ddress: :ity-St-Zip:	P () De MCLANAHAN, WAL 7812 BLAKFORD N JACKSONVILLE, F	_TER MILL LN	Title: Name: Address: City-St-Zip:	()Change ()Addition		
itle: lame: .ddress: city-St-Zip:	VP () De POSEY, DENNIS 3205 SEARCH WO JACKSONVILLE, F	OOP DR	Title: Name: Address: City-St-Zip:	() Change () Addition		
lame: .ddress: bity-St-Zip: itle: lame: .ddress:	POSEY, DENNÍS 3205 SEARCH WO	DOP DR EL 32277 elete S D WAY	Name: Address:	() Change () Addition () Change () Addition		
lame: .ddress:	POSEY, DENNIS 3205 SEARCH WC JACKSONVILLE, F T () De MCGARRY, JAMES 4269 STRATFORD	DOP DR EL 32277 Elete S D WAY EL 32225	Name: Address: City-St-Zip: Title: Name: Address:	· · · · · · · · · · · · · · · · · · ·		
dame: ddress: itty-St-Zip: ittle: dame: ddress: itty-St-Zip: ittle: ame: ddress:	POSEY, DENNIS 3205 SEARCH WC JACKSONVILLE, F T () De MCGARRY, JAMES 4269 STRATFORD JACKSONVILLE, F D () De LEWIS, ERICK 32246 KLINE RD	DOP DR EL 32277 elete S DWAY EL 32225 elete	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition		

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: JAMES R MCGARRY TREA 01/16/2009