

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23531

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: EVERGLADES LIONS CLUB, INC.

**Current Principal Place of Business:**

EVERGLADES SEAFOOD DEPOT  
102 COLLIER AVENUE  
EVERGLADES CITY, FL 34139

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 189  
EVERGLADES CITY, FL 34139

**New Mailing Address:**

FEI Number: 59-6170005

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MIDDELSTAEDT, ELAINE H  
410 S. STORTER AVE. POB 277  
EVERGLADES CITY, FL 34139 US

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

MIDDELSTAEDT, ELAINE  
410 S STORTER AVE  
EVERGLADES CITY, FL 34139 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: ELAINE MIDDELSTAEDT

04/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: MIDDELSTAEDT, ELAINE H  
Address: 410 S STORTER AV, PO BOX 277  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: V ( ) Delete  
Name: PENNELL, JACK  
Address: 34 FLAMINGO DR POB 513  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: D ( ) Delete  
Name: TIFFT, FRANCES  
Address: 210 S COPELAND AVE POB 97  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MIDDELSTAEDT, ELAINE  
Address: 410 S STORTER AVE  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: V (X) Change ( ) Addition  
Name: PENNELL, JACK  
Address: 34 FLAMINGO DR  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: D (X) Change ( ) Addition  
Name: TIFFT, FRANCES  
Address: 135 FLICKER LANE  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: S ( ) Change (X) Addition  
Name: JOINER, DOROTHY  
Address: 825 S COPELAND AVE #1  
City-St-Zip: EVERGLADES CITY, FL 34139

Title: T ( ) Change (X) Addition  
Name: PARKER, ARITA  
Address: 247 SWAIN ST  
City-St-Zip: COPELAND, FL 24137

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: ELAINE MIDDELSTAEDT

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date