

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24197

FILED
Feb 25, 2009
Secretary of State

Entity Name: SOUTH DAYTONA LIONS CLUB, INC.

Current Principal Place of Business:

P.O. BOX 4512
SOUTH DAYTONA, FL 32121

New Principal Place of Business:

600 WILDER BLVD
DAYTONA BEACH, FL 32114 US

Current Mailing Address:

P.O. BOX 4512
SOUTH DAYTONA, FL 32121

New Mailing Address:

1942 FERN PLACE
SOUTH DAYTONA, FL 32119 US

FEI Number: 59-2356163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, RICHARD
1942 FERN PLACE
SOUTH DAYTONA, FL 32119 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: LEIZEAR, GLEN
Address: 600 WILDER BLVD
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D () Delete
Name: MCADOVY, JOE
Address: 2308 CITRUS AVE
City-St-Zip: SO. DAYTONA, FL 32119

Title: D () Delete
Name: DONCASTER, BOB
Address: 6187 YELLOWSTONE DR
City-St-Zip: PT ORANGE, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: LEIZEAR, GLEN
Address: 600 WILDER BLVD
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: D (X) Change () Addition
Name: MCADOVY, JOE
Address: 2308 CITRUS AVE
City-St-Zip: SO. DAYTONA, FL 32119 US

Title: D (X) Change () Addition
Name: DONCASTER, BOB
Address: 6187 YELLOWSTONE DR
City-St-Zip: PT ORANGE, FL 32127 US

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: JOE MCADORY

CHAP

02/25/2009

Electronic Signature of Signing Officer or Director

_____ Date