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FILED
Feb 09 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N24491 (5)

1. Corporation Name

SANFORD LIONS CLUB, INC.



Principal Place of Business

Mailing Address

310 WILSON PLACE DR.
SANFORD FL 32771
US

P.O. BOX 2592
SANFORD FL 32771
US

3. Date Incorporated or Qualified

01/25/1988

4. FEI Number

59-6170084

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 103 Country Place

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23 Sanford, FL

28

Zip

Country

Zip

Country

24 32771

25

US

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FITZGERALD, JOYCE
310 WILSON PLACE DR.
SANFORD FL 32771

81 Name

SMITH, ROBERT J.

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

103 Country Place

83

84 City

Sanford

FL

85 Zip Code
32771

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

1-27-98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME FITZGERALD, JOYCE
STREET ADDRESS 310 WILSON PLACE DR.
CITY-ST-ZIP SANFORD FL

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME SMITH, ROBERT J.
1.3 STREET ADDRESS 103 COUNTRY PLACE
1.4 CITY-ST-ZIP SANFORD, FL 32771

TITLE S ☐ DELETE
NAME ALTEMOSE, MATTHEW
STREET ADDRESS 407 DORCHESTER SQ.
CITY-ST-ZIP LAKE MARY FL

2.1 TITLE S ☒ Change ☐ Addition
2.2 NAME SPAULDING, ELAINE
2.3 STREET ADDRESS 109 CROOKED PINE DR
2.4 CITY-ST-ZIP SANFORD, FL 32773

TITLE VP ☐ DELETE
NAME HALL, DAVID
STREET ADDRESS 2705 S. SANFORD AVE.
CITY-ST-ZIP SANFORD FL

3.1 TITLE VP ☒ Change ☐ Addition
3.2 NAME RUSSELL, COLIN
3.3 STREET ADDRESS 4841 SHORELINE CIR.
3.4 CITY-ST-ZIP SANFORD, FL 32771

TITLE T ☐ DELETE
NAME ALTEMOSE, TIFFANY
STREET ADDRESS 407 DORCHESTER SQ.
CITY-ST-ZIP LAKE MARY FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME HAMMACK, LENDRE
STREET ADDRESS 121 SAND PINE CIRCLE
CITY-ST-ZIP SANFORD FL

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME RUSSELL, ALVA
5.3 STREET ADDRESS 4841 SHORELINE CIR.
5.4 CITY-ST-ZIP SANFORD, FL 32771

TITLE D ☐ DELETE
NAME CHANG, GLORIA
STREET ADDRESS 106 RAMBLEWOOD DR
CITY-ST-ZIP SANFORD FL 32773

6.1 TITLE D ☒ Change ☐ Addition
6.2 NAME HIGHSMITH, HAROLD
6.3 STREET ADDRESS 405 MATTIE DR.
6.4 CITY-ST-ZIP SANFORD, FL 32773

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1-27-98 (407) 324-0104

CR2E037 (10/97)