

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90055 003 ****61.25

DOCUMENT # N24491 1. Entity Name SANFORD LAKESIDE LIONS CLUB, INC.	
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Principal Place of Business 121 SAND PINE CIRCLE SANFORD FL 32773 US	Mailing Address PO BOX 12 SANFORD FL 32772 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent HAMMACK, LENORE 121 SAND PINE CIRCLE SANFORD FL 32773	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 *Lenore E. Hammack* 4/20/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ALTEMOSE, TIFFANY 214 FORREST DRIVE SANFORD FL 32773 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Loper, Sam 2014 Codova Drive Sanford, FL 32771 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ALTEMOSA, MATT 214 FORREST DRIVE SANFORD FL 32773 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Altemose (not Altemosa) - Thanks! ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1V LOPER, SAM 2104 CODOVA DRIVE SANFORD FL 32771 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	1V Owen, Ron (Ron Owen) 1161 Naomi Lane Sanford, Florida 32773 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HAMMACK, LENORE 121 SAND PINE CIRCLE SANFORD FL 32773 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FITZGERALD, BERNARD 310 WILSON PLACE DRIVE SANFORD FL 32771 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HAMMACK, CHARLES R 121 SAND PINE CIRCLE SANFORD FL 32773 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Lenore E. Hammack - Treasurer of Sanford* 4/20/07 330-7458
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #