

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N24942

1. Entity Name

LUTZ LAND O'LAKES (LLLL) LIONS CLUB, INC.

FILED

00 APR -3 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

19002 1ST SW
SUITE B
LUTZ FL 33549
US

Mailing Address

PO BOX 2336
LUTZ FL 33548-2336
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2918112

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HELEN, CORNAGLIA
17844 SUNRISE DR
LUTZ FL 33549

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP
NAME WALTON, CATHY
STREET ADDRESS 2001 BRINSON ROAD
CITY-ST-ZIP LUTZ FL ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD
NAME VIGGIANO, CAROL
STREET ADDRESS 1531 SPINNINGWHEEL DRIVE
CITY-ST-ZIP LUTZ FL ☐ Delete

TITLE D
NAME VIGGIANO, CAROL
STREET ADDRESS 1531 SPINNINGWHEEL DRIVE
CITY-ST-ZIP LUTZ, FL ☒ Change ☐ Addition

TITLE SD
NAME HENRY, NANCY
STREET ADDRESS 21725 BELL LAKE RD
CITY-ST-ZIP LAND O'LAKES FL ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PPD
NAME HARTLEY, ANN
STREET ADDRESS 707 W 116TH AVE
CITY-ST-ZIP TAMPA FL ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME CORNAGLIA, HELEN
STREET ADDRESS 17844 SUNRISE DRIVE
CITY-ST-ZIP LUTZ FL 33549 ☐ Delete

TITLE TD
NAME MARGIE, FRANKLIN
STREET ADDRESS 22205 RIVER ROCK DRIVE
CITY-ST-ZIP LAND O'LAKES ☒ Change ☒ Addition

TITLE P
NAME SHIPMAN, LYNNITA
STREET ADDRESS 101 2ND AVE. S.E.
CITY-ST-ZIP LUTZ FL ☐ 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 exemption stated in Section 119.07(3)(i), 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: NANCY A. HENRY REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(813) 996-6832

CR2E037 (9/99)