

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24942

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** LUTZ LAND O'LAKES (LLLL) LIONS CLUB, INC.

**Current Principal Place of Business:**

19002 1ST SW  
SUITE B  
LUTZ, FL 33549 US

**New Principal Place of Business:**

**Current Mailing Address:**

5103 EAGLE BLVD.  
LAND O LAKES, FL 34639 US

**New Mailing Address:**

**FEI Number:** 59-2918112

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALTON, CATHERINE V  
4339 WHITTNER DRIVE  
LAND O LAKES, FL 34639 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: D ( ) Delete  
Name: HENRY, NANCY  
Address: 21725 BELL LAKE RD.  
City-St-Zip: LAND O'LAKES, FL 34639

Title: D ( ) Delete  
Name: STATHAS, SUZAN  
Address: 16049 GRASS LAKE DR.  
City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete  
Name: CARBAUGH, JOHN  
Address: 2412 WALLACE RD.  
City-St-Zip: LUTZ, FL 33549

Title: ST ( ) Delete  
Name: KLINKERS, SANDRA  
Address: 5103 EAGLE BLVD  
City-St-Zip: LAND O'LAKES, FL 34639

Title: P ( ) Delete  
Name: ANTHONY, KENNETH E  
Address: 2412 WALLACE RD.  
City-St-Zip: LUTZ, FL 33549

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PP (X) Change ( ) Addition  
Name: ANTHONY, KENNETH E  
Address: 2412 WALLACE RD.  
City-St-Zip: LUTZ, FL 33549

Title: P ( ) Change (X) Addition  
Name: LASTINGER, LOIS  
Address: 29743 MORWYN PLACE  
City-St-Zip: WESLEY CHAPEL, FL 33543

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: SANDRA KLINKERS

ST

04/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date