

FILE NOW: FILING FEE IS \$61.25

FILED

May 01 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N24961** (7)
1. Corporation Name
EAST ORANGE LIONS CLUB, INC.

Principal Place of Business NEDLEY, PAUL J. 9930 CHESHAM DRIVE ORLANDO FL 32817-0280	Mailing Address NEDLEY, PAUL J. 9930 CHESHAM DRIVE ORLANDO FL 32817-0280
--	--



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
---	--

3. Date Incorporated or Qualified 02/23/1988	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent NEDLEY, PAUL J. 9930 CHESHAM DRIVE ORLANDO FL 32817-0280
--

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
--

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 Paul J. Nedley DATE APRIL 23 - 1998
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	VD <input type="checkbox"/> DELETE
NAME	LOPEZ, FELIX
STREET ADDRESS	5412 N DEAN ROAD
CITY-ST-ZIP	ORLANDO FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	WATTS, ALLAN
STREET ADDRESS	5427 JEAN DR.
CITY-ST-ZIP	ORLANDO FL
TITLE	PD <input type="checkbox"/> DELETE
NAME	WHITE, NATHAN
STREET ADDRESS	716 MALONEY LANE
CITY-ST-ZIP	ORLANDO FL
TITLE	SD <input checked="" type="checkbox"/> DELETE
NAME	GRANTHAM, CHARLES
STREET ADDRESS	716 MALONEY LANE
CITY-ST-ZIP	ORLANDO FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	NEDLEY, PAUL
STREET ADDRESS	9930 CHESHAM DRIVE
CITY-ST-ZIP	ORLANDO FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	S D
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	32817
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	7121 TURQUISE LN
3.4 CITY-ST-ZIP	ORLANDO, FL 32807
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D, RATZ, JEFFREY
4.3 STREET ADDRESS	208 CROOKED STICK
4.4 CITY-ST-ZIP	ORLANDO, FL 32828
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	32817
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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: Paul J. Nedley 4-23-98 407-679-4690

CR2E037 (10/97)