

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90026 048 ****70.00

DOCUMENT # N28438

1. Entity Name

HALF MOON LIONS CLUB, INC.



Principal Place of Business

2220 S.E. 172ND TERR
SILVER SPRINGS FL 24488
US

Mailing Address

2220 S.E. 172ND TERR
SILVER SPRINGS FL 34488
US

40019202



1st MOORE CR2E037 (10/04)

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

59-1614155

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEE, EDITH A
2220 S.E. 172ND TERR
SILVER SPRINGS FL 34488

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME EDITH, LEE A
STREET ADDRESS 2220 SE 17TH TERRACE
CITY-ST-ZIP SILVER SPRINGS FL 34488

TITLE D ☒ Delete
NAME MCDONALD, STELLA
STREET ADDRESS 8605 NE 153RD AVE
CITY-ST-ZIP SILVER SPRINGS FL 34488

TITLE D ☐ Delete
NAME JORGENSEN, CHARLES
STREET ADDRESS 16962 S.E. 65TH PLACE
CITY-ST-ZIP OCKLAWAHA FL 32179

TITLE VD ☐ Delete
NAME JORGENSEN, LAURIE
STREET ADDRESS 16962 SE 65TH PLACE
CITY-ST-ZIP OCKLAWAHA FL 32179

TITLE SD ☐ Delete
NAME MATYLEWICZ, JUDY
STREET ADDRESS 180 20 SE 17TH ST
CITY-ST-ZIP SILVER SPRINGS FL 34488

TITLE D ☐ Delete
NAME SMITH, MARTIN
STREET ADDRESS 16939 SE 14TH ST RD
CITY-ST-ZIP SILVER SPRINGS FL 34488

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☒ Addition
NAME PEGGY PENNYBAKER
STREET ADDRESS 16939 SE 14th ST RD
CITY-ST-ZIP SILVER SPRINGS FL 34488

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

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

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

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

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: *Edith Lee*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-9-05 625-7388

Date

Daytime Phone #