

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N29944 (8)

1. Corporation Name

ORLANDO DOWNTOWN LIONS CLUB, INC.



Principal Place of Business

Mailing Address

C/O ROGER H. GILL
2014 E. ESTHER ST.
ORLANDO FL 32806

C/O ROGER H. GILL
2014 E. ESTHER ST.
ORLANDO FL 32806

3. Date Incorporated or Qualified
12/21/1988

3a. Date of Last Report
03/23/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILL, ROGER H.
2014 E. ESTHER ST.
ORLANDO FL 32806

81 Name

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

83

84 City

FL

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 15, 1996

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME **CONSER, LEE**
STREET ADDRESS **2329 HOMEWOOD DRIVE**
CITY-ST-ZIP **ORLANDO FL**

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

NAME **MOON, WALTER**
STREET ADDRESS **517 WOODLAND ST**
CITY-ST-ZIP **ORLANDO FL**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

NAME **KELLEY, AL**
STREET ADDRESS **3523 EAGLE DR**
CITY-ST-ZIP **ORLANDO FL**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **V** ☐ DELETE

NAME **SHAW, ROBERT**
STREET ADDRESS **5111 CYPRESS CREEK DRIVE**
CITY-ST-ZIP **ORLANDO FL**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE

NAME **KAUFFMAN, ELMER**
STREET ADDRESS **4300 OLD DOMINION ROAD**
CITY-ST-ZIP **ORLANDO FL**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **S** ☐ DELETE

NAME **GILL, ROGER H.**
STREET ADDRESS **2014 E. ESTHER ST.**
CITY-ST-ZIP **ORLANDO FL**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Roger H. Gill*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 15, 1996 407-898-2361

Date Daytime Phone

CR2E037 (12/95)