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Feb 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA 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

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

Mailing Address

C/O ROGER H. GILL
2014 E. ESTHER ST.
ORLANDO FL 32806-32413. Date Incorporated or Qualified
12/21/19883a. Date of Last Report
01/24/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number
59-2952656Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

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

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME CONSER, LEE
STREET ADDRESS 2329 HOMEWOOD DRIVE
CITY-ST-ZIP ORLANDO FLTITLE D ☒ DELETE
NAME MOON, WALTER
STREET ADDRESS 517 WOODLAND ST
CITY-ST-ZIP ORLANDO FLTITLE D ☐ DELETE
NAME KELLEY, AL
STREET ADDRESS 3523 EAGLE DR
CITY-ST-ZIP ORLANDO FLTITLE V ☐ DELETE
NAME SHAW, ROBERT
STREET ADDRESS 5111 CYPRESS CREEK DRIVE
CITY-ST-ZIP ORLANDO FLTITLE D ☐ DELETE
NAME KAUFFMAN, ELMER
STREET ADDRESS 4300 OLD DOMINION ROAD
CITY-ST-ZIP ORLANDO FLTITLE S ☐ DELETE
NAME GILL, ROGER H.
STREET ADDRESS 2014 E. ESTHER ST.
CITY-ST-ZIP ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME ROBERT MILBURN
1.3 STREET ADDRESS 1921 TAYLOR AVE.
1.4 CITY-ST-ZIP WINTER PARK FL 327822.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 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 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:

ROGER H. GILL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/17/97 407-898-2361
Daytime Phone # 0016740

CR2E037 (9/96)