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 # **N33228** **(0)**

1. Corporation Name

ORANGE BLOSSOM GARDENS LIONS CLUB, INC.

Principal Place of Business	Mailing Address
412 MARK DR. LADY LAKE FL 32159	412 MARK DR. LADY LAKE FL 32159

2. Principal Place of Business	2a. Mailing Address
21 619 Rainbow Blvd.	26 619 Rainbow Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Lady Lake, FL	City & State 28 Lady Lake, FL
Zip 24 32159 / Country 25 USA	Zip 29 32159 / Country 30 USA

3. Date Incorporated or Qualified: 07/13/1989

3a. Date of Last Report: 04/11/1995

4. FEI Number: 59-2844668 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HANSON, PAUL R.
412 MARK DR.
LADY LAKE FL 32159

10. Name and Address of New Registered Agent

81 Name: Arthur R. Emerick
82 Street Address (P.O. Box Number is Not Acceptable): 619 Rainbow Blvd.
83
84 City: Lady Lake **FL** 85 Zip Code: 32159

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: Arthur R. Emerick — Arthur R. Emerick — 3/27/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	GOLDEN, THOMAS E.		1.2 NAME	Albert A. Fleisher	
STREET ADDRESS	1203 TARPON LANE		1.3 STREET ADDRESS	1219 Palmetto Dr.	
CITY-ST-ZIP	LADY LAKE FL		1.4 CITY-ST-ZIP	Lady Lake, FL 32159	
TITLE	S	☒ DELETE	2.1 TITLE	S	☒ Change ☐ Addition
NAME	HANSON, PAUL R.		2.2 NAME	Arthur R. Emerick	
STREET ADDRESS	412 MARK DR.		2.3 STREET ADDRESS	619 Rainbow Blvd.	
CITY-ST-ZIP	LADY LAKE FL		2.4 CITY-ST-ZIP	Lady Lake, FL 32159	
TITLE	D	☒ DELETE	3.1 TITLE	D	☒ Change ☐ Addition
NAME	HARPER, JOSEPH D.		3.2 NAME	John H. Benson	
STREET ADDRESS	1775 W. SCHWARTZ BLVD.		3.3 STREET ADDRESS	1504 W. Schwartz Blvd.	
CITY-ST-ZIP	LADY LAKE FL		3.4 CITY-ST-ZIP	Lady Lake, FL 32159	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MCCLINTON, WILLIAM		4.2 NAME		
STREET ADDRESS	910 CHULA ST.		4.3 STREET ADDRESS		
CITY-ST-ZIP	LADY LAKE FL		4.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	BEACHER, PAUL C		5.2 NAME	Harold M. Summers	
STREET ADDRESS	1766 HILTON HEAD BLVD.		5.3 STREET ADDRESS	539 Bonita Dr.	
CITY-ST-ZIP	LADY LAKE FL		5.4 CITY-ST-ZIP	Lady Lake, FL 32159	
TITLE	D	☒ DELETE	6.1 TITLE	D	☒ Change ☐ Addition
NAME	HADDAWAY, LOUIS S		6.2 NAME	Henry B. Thomas	
STREET ADDRESS	1111 DUSTIN DR.		6.3 STREET ADDRESS	612 Tracy Dr.	
CITY-ST-ZIP	LADY LAKE FL		6.4 CITY-ST-ZIP	Lady Lake, FL 32159	

CR2E037 (12/95)

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: Paul R. Hanson Sec. PAUL R. HANSON 3/27/96 352-753-3756
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #