FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jun 02, 2002 8:00 am § Secretary of State **DOCUMENT # N37032** 1. Entity Name 06-02-2002 90908 050 ****61.25 THE VERO BEACH LIONS CLUB, INC. Principal Place of Business Mailing Address PO BOX 1204 P.O. BOX 1204 VERO BEACH FL 32961 VERO BEACH FL 32961 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0287861 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) ROSSWAY, BRADLEY W. 5070 N HWY A1A SUITE 200 VERO BEACH FL 32963 Zip Code FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE President Change ☐ Addition NAME WHITE, MAURICE NAME Jeff Schlitt STREET ADDRESS 1850 BAY RD. STREET ADDRESS 1364 33 nd Ave Sw CITY-ST-7IP VERO BEACH FL 32963 CITY-ST-ZIP leso Beach Frankly TITLE TD ☐ Delete TITLE Change ☐ Addition NAME PHILLIPS, RANDY NAME STREET ADDRESS 1645 HIGHLAND AVE STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32960 CITY-ST-ZIP AND SECOND CONTRACTOR OF THE PROPERTY WAS AND ADDRESS OF THE PROPERTY WAS ADDRESS TITLE VPD ☐ Delete Vice President Change Addition NAME Schlitt, Jeff NAME Marvice unite STREET ADDRESS 1364 33RD AVE SW STREET ADDRESS 1850 Ban Road CITY-ST-ZIP VERO BEACH FL 32968 CITY-ST-ZIP SD ☐ Delete TITLE Change ☐ Addition MYERS, KATHY NAME STREET ADDRESS 9376 88TH ST STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32967 CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE: