

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37032

FILED  
Feb 12, 2009  
Secretary of State

**Entity Name:** THE VERO BEACH LIONS CLUB, INC.

**Current Principal Place of Business:**

7960 BRIGHTON MANOR  
VERO BEACH, FL 32966 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1204  
VERO BEACH, FL 32961 US

**New Mailing Address:**

**FEI Number:** 65-0287861

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSSWAY, BRADLEY W.  
5070 N HWY A1A  
SUITE 200  
VERO BEACH, FL 32963 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BLANCHARD, MARIE  
Address: 1390 19TH AVENUE  
City-St-Zip: VERO BEACH, FL 329626167

Title: TD ( ) Delete  
Name: PHILLIPS, RANDY  
Address: 1645 HIGHLAND AVE.  
City-St-Zip: VERO BEACH, FL 32960

Title: SD ( ) Delete  
Name: CURCIO, BYRON  
Address: 7960 BRIGHTON MANOR  
City-St-Zip: VERO BEACH, FL 32966

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CURCIO, BYRON  
Address: 7960 BRIGHTON MANOR  
City-St-Zip: VERO BEACH, FL 32966

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: SMITH, ED  
Address: 2405 3RD PLACE  
City-St-Zip: VERO BEACH, FL 32962

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BYRON CURCIO

PD

02/12/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date