

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90358 044 ****61.25

DOCUMENT # N43780 1. Entry Name LAKELAND DIXIELAND LIONS CLUB, INC.					
Principal Place of Business P.O. BOX90665 LAKELAND, FL 33806 US			Mailing Address P.O. BOX90665 LAKELAND, FL 33806 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 04202008 Chg-NP CR2E037 (12/06)	
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-3124150		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent WALKER, PAUL 1625 ARIANA ST. LOT #24 LAKELAND, FL 33803					
7. Name and Address of New Registered Agent Name MACE HUNTER Street Address (P.O. Box Number is Not Acceptable) 2210 SUGAR CREEK DR. City LAKELAND, FL. FL Zip Code 33809					
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE MACE HUNTER P.P. <i>Mace Hunter</i> APR. 21-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-electing)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUNTER, MACE <input type="checkbox"/> Delete 2210 SUGAR CRK DR LAKELAND, FL 33811		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Change <input type="checkbox"/> Addition KENNETH WOODEN 2260 GRAND CYPRESS DR. LAKELAND, FL 33810	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete ROSS, DICK 4952 PLEASANT HOLLOW TRAIL LAKELAND, FL 33811		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ZVP <input type="checkbox"/> Delete HANNA, BILL 3734 INNISBROOK DR. LAKELAND, FL 33810		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Delete KLEINTOP, MARY ANN 5723 LAKE GROVE DR LAKELAND, FL 33809		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete ROSS, DEBBIE 4952 PLEASANT HOLLOW TR LAKELAND, FL 33810		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete SWANN, ROBERT D 8534 GIBSON OAKS DRIVE LAKELAND, FL 33811		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Robert D. Swann</i> ROBERT D. SWANN 04-21-08 863-853-7980 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					