

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48321

FILED
Apr 28, 2009
Secretary of State

Entity Name: PORT CHARLOTTE LIONS CLUB FOUNDATION, INC.

Current Principal Place of Business:

HAROLD BUTLER
3153 KINGSTON STREET
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

ROGER RICHMOND
3251 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952

Current Mailing Address:

PORT CHARLOTTE LIONS CLUB
PO BOX 494007
PORT CHARLOTTE, FL 33949

New Mailing Address:

FEI Number: 65-0322478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, HAROLD
3153 KINGSTON STREET
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

RICHMOND, ROGER
3251 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33952 US

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: ROGER RICHMOND

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, INEZ
Address: 22093 SEATON
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: S () Delete
Name: PRITCHARD, LYDIA
Address: 114 LENOIR ST SW
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: D () Delete
Name: PRITCHARD, LYNDON
Address: 114 LENOIR ST NW
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: BUTLER, JUNE
Address: 3153 KINGSTON ST.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T () Delete
Name: BUTLER, HAROLD
Address: 3153 KINGSTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: HEGARD, DOLORES
Address: 22369 LEGUARDIA AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: T (X) Change () Addition
Name: RICHMOND, ROGER
Address: 3251 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

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

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: ROGER RICHMOND

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date