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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N50795					
1. Corporation Name OKEECHOBEE LIONS CLUB, INC.					
Principal Place of Business P O BOX 89 OKEECHOBEE FL 34972 US			Mailing Address P O BOX 89 OKEECHOBEE FL 34973 US		



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 09/09/1992 4. FEI Number 65-0366516 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																																																																																																																																																	
9. Name and Address of Current Registered Agent BURK, STEPHEN E 105 NW 6TH ST PO BOX 89 OKEECHOBEE FL 34972			10. Name and Address of New Registered Agent 81 Name HARRY HARRICK 82 Street Address (P.O./Box Number is Not Acceptable) 2201 SW 28TH ST. V-72 83 84 City OKEECHOBEE FL 85 Zip Code 34974																																																																																																																																																		
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 <i>Harry Horrick</i> DATE 4-27-99 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																																																																																																																																																					
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>TDS</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>BURK, STEPHEN E</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7920 NW 82ND CT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34972</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VTD</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>JOLE, MIKE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1936 NW 46 AVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34973</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PTD</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>HIOTT, PAUL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>500 SE 8TH DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34974</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>LIPSCOMB, JAMES P</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>105 NW 6TH ST</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34972</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☐ DELETE</td> </tr> <tr> <td>NAME</td> <td>WILSON, JOHN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2286 SW 2ND CT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34974</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>☒ DELETE</td> </tr> <tr> <td>NAME</td> <td>GRINDSTAFF, MARK</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>14626 NW 34TH TERRACE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34972</td> <td></td> </tr> </table>			TITLE	TDS	☒ DELETE	NAME	BURK, STEPHEN E		STREET ADDRESS	7920 NW 82ND CT		CITY-ST-ZIP	OKEECHOBEE FL 34972		TITLE	VTD	☒ DELETE	NAME	JOLE, MIKE		STREET ADDRESS	1936 NW 46 AVE		CITY-ST-ZIP	OKEECHOBEE FL 34973		TITLE	PTD	☒ DELETE	NAME	HIOTT, PAUL		STREET ADDRESS	500 SE 8TH DR		CITY-ST-ZIP	OKEECHOBEE FL 34974		TITLE	D	☒ DELETE	NAME	LIPSCOMB, JAMES P		STREET ADDRESS	105 NW 6TH ST		CITY-ST-ZIP	OKEECHOBEE FL 34972		TITLE	D	☐ DELETE	NAME	WILSON, JOHN		STREET ADDRESS	2286 SW 2ND CT		CITY-ST-ZIP	OKEECHOBEE FL 34974		TITLE	D	☒ DELETE	NAME	GRINDSTAFF, MARK		STREET ADDRESS	14626 NW 34TH TERRACE		CITY-ST-ZIP	OKEECHOBEE FL 34972		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>T/D</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>1.2 NAME</td> <td>HARRY HORRICK</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>2201 SW 28TH ST. (V-72)</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34974</td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td>VTD</td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>2.2 NAME</td> <td>ELDER SUMNER</td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td>309 S.W. 3RD ST.</td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34974</td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td>PTD</td> <td>☒ Change ☐ Addition</td> </tr> <tr> <td>3.2 NAME</td> <td>IAN NAIRNSEY</td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td>2201 S.W. 28TH STREET VILLA #71</td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td>Okeechobee FL 34974</td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td>S/D</td> <td>☒ Change ☒ Addition</td> </tr> <tr> <td>4.2 NAME</td> <td>LAVON BASS</td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td>2001 SW 5TH AVE</td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34974</td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td>D</td> <td>☐ Change ☒ Addition</td> </tr> <tr> <td>6.2 NAME</td> <td>GARY MILES</td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td>274 SE 15TH AVE</td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td>OKEECHOBEE FL 34974</td> <td></td> </tr> </table>			1.1 TITLE	T/D	☒ Change ☐ Addition	1.2 NAME	HARRY HORRICK		1.3 STREET ADDRESS	2201 SW 28TH ST. (V-72)		1.4 CITY-ST-ZIP	OKEECHOBEE FL 34974		2.1 TITLE	VTD	☐ Change ☐ Addition	2.2 NAME	ELDER SUMNER		2.3 STREET ADDRESS	309 S.W. 3RD ST.		2.4 CITY-ST-ZIP	OKEECHOBEE FL 34974		3.1 TITLE	PTD	☒ Change ☐ Addition	3.2 NAME	IAN NAIRNSEY		3.3 STREET ADDRESS	2201 S.W. 28TH STREET VILLA #71		3.4 CITY-ST-ZIP	Okeechobee FL 34974		4.1 TITLE	S/D	☒ Change ☒ Addition	4.2 NAME	LAVON BASS		4.3 STREET ADDRESS	2001 SW 5TH AVE		4.4 CITY-ST-ZIP	OKEECHOBEE FL 34974		5.1 TITLE		☐ Change ☐ Addition	5.2 NAME			5.3 STREET ADDRESS			5.4 CITY-ST-ZIP			6.1 TITLE	D	☐ Change ☒ Addition	6.2 NAME	GARY MILES		6.3 STREET ADDRESS	274 SE 15TH AVE		6.4 CITY-ST-ZIP	OKEECHOBEE FL 34974	
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14. 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 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, with all other like empowered.

SIGNATURE: *Harry Horrick* DATE: **4-27-99** DAYTIME PHONE: **941-763 5486**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)