

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 91329 045 ****61.25

DOCUMENT # N93000001363

1. Entity Name

BOYNTON BEACH LIONS ACTIVITIES, INC.

Principal Place of Business

**306 E. BOYNTON BEACH BLVD.
 BOYNTON BEACH FL 33435**

Mailing Address

**2424 N. FEDERAL HWY
 #205
 BOYNTON BEACH FL 33435**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0402485

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GROMKO, DONALD J
 2424 N FEDERAL HWY #205
 BOYNTON BEACH FL 33435**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
 NAME **WEEKS, LLOYD**
 STREET ADDRESS **4251 OLD BOYNTON RD**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **WEAVER, STANLEY**
 STREET ADDRESS **4662 LOTUS WAY**
 CITY-ST-ZIP **BOYNTON BEACH FL 33436-2931**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **ROBERT COLLIER**
 STREET ADDRESS **1381 S.W. 27TH AVE.**
 CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **GROMKO, DONALD J**
 STREET ADDRESS **2424 N FEDERAL HWY #205**
 CITY-ST-ZIP **BOYNTON BEACH FL 33435**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **THOMAS P. HOWELL**
 STREET ADDRESS **59 SPANISH RIVER DR**
 CITY-ST-ZIP **OCEAN RIDGE FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Donald J. Gromko
 DONALD J. GROMKO

Date

Daytime Phone #

1/25/01 561.740.2374

CR2E037 (10/00)