SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF UNRESOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 10 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002823 (2)

1. Corporation Name
POMPANO BEACH SOUTH LIONS CLUB, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3821 NE 15TH TERRACE POMPANO BEACH FL 33064	3821 NE 15TH TERRACE POMPANO BEACH FL 33064

3. Date Incorporated or Qualified: 06/07/1994
3a. Date of Last Report:
4. FEI Number: 59-2799422 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **FILING FEE IS $61.25**
8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MILLER, GERALD
3821 NE 15TH TERRACE
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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: Gerald Miller 6/30/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	P	☒ Change ☐ Addition
NAME	BARBY, STAN	1.2 NAME	GREER, HERMAN	
STREET ADDRESS	651 SW 6TH ST., SUITE 1010	1.3 STREET ADDRESS	191 NE 27ST	
CITY-ST-ZIP	POMPANO BEACH FL 33060	1.4 CITY-ST-ZIP	POMPANO BEACH, FL 33064	
TITLE	D	2.1 TITLE	V	☒ Change ☐ Addition
NAME	HELD, CHARLENE	2.2 NAME	HOYT, DOROTHY	
STREET ADDRESS	4010 NE 15TH AVE.	2.3 STREET ADDRESS	586 NW 45 WAY	
CITY-ST-ZIP	POMPANO BEACH FL 33064	2.4 CITY-ST-ZIP	DELRAY BEACH, FL 33445	
TITLE	D	3.1 TITLE	S	☒ Change ☐ Addition
NAME	HELD, JAMES	3.2 NAME	MILLER, GERALD	
STREET ADDRESS	4010 NE 15TH AVE.	3.3 STREET ADDRESS	3821 NE 15 TERR	
CITY-ST-ZIP	POMPANO BEACH FL 33064	3.4 CITY-ST-ZIP	POMPANO BEACH, FL 33064	
TITLE	D	4.1 TITLE	T	☒ Change ☐ Addition
NAME	HOYT, DOROTHY	4.2 NAME	HELD, JAMES	
STREET ADDRESS	586 NW 45TH WAY	4.3 STREET ADDRESS	1840 NE 48ST #228	
CITY-ST-ZIP	DELRAY BEACH FL 33445	4.4 CITY-ST-ZIP	POMPANO BEACH, FL 33064	
TITLE	P	5.1 TITLE	D	☐ Change ☒ Addition
NAME	MILLER, GERALD	5.2 NAME	MILLER, DOROTHY	
STREET ADDRESS	3821 NE 15TH TERRACE	5.3 STREET ADDRESS	3821 NE 15TER	
CITY-ST-ZIP	POMPANO BEACH FL	5.4 CITY-ST-ZIP	POMPANO BEACH, FL 33064	
TITLE	V	6.1 TITLE	D	☐ Change ☐ Addition
NAME	GREER, HERMAN	6.2 NAME	BARBY, STAN	
STREET ADDRESS	191 NE 27TH ST.	6.3 STREET ADDRESS	651 SW 6 ST STE 1010	
CITY-ST-ZIP	POMPANO BEACH FL 33064	6.4 CITY-ST-ZIP	POMPANO BEACH, FL 33060	

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Gerald Miller GERALD MILLER 6/30/95 (954)942-5894
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004858