## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

IGNATURE:

N94000003479 (2)

AUBU	RNDALE LIONS CLUB, INC	· ·							
Principal Plac	ce of Business	Mailing Address				T LOSTICIOL QUE INCIT ANNI ANNI ANNI	## [10 <b>##</b> 12] <b>#</b>	#18# (11   #181(	10070 4071 1041
226 BENNETT ST. P.O. BOX 1271 AUBURNDALF FL 33823 AUBURNDALE FL 33823-1271 US							100 5		
						3. Date Incorporated or Qualified 07/14/1994	Ja. Da	ate of Last R <b>09/23/1</b> 9	
	rincipal Place of Business 2a. Mailing Address					4. FEI Number 65-0701	034	Ar	oplied For
	SAME AS ABOVE 26 SAME A Suite, Apt. #, etc. Suite, Apt. #, etc.			1/2	<u>.                                    </u>	APPLIED FOR			ot Applicable
Suite, Apt	. #, e(C.	Suite, Apt. #, etc.	<b>~</b>			5. Certificate of Status Desired			Additional egulred
City & Sta	10	City & State				6. Election Campaign Financing		\$5.00	May Be
23	<del></del>	28	<del></del>			Trust Fund Contribution		Added	to Fees
Zip	Country	<del>  -  </del>	Zip Country			8. This corporation has liability for i	intangìble Yes		. 199.032,
24	25 9, Name and Address of Curre	29   ent Registered Agent	[30]			Florida Statutes  10. Name and Address of New Re			
				B1	Name				
GABALDON, ADRIAN					Street Add	SAME ress (P.O. Box Number is Not Acceptab	(a)		
210 S.				B2	Street Addi	ess (1.0. pox nombal is not neceptab			
	OX-1303		)1	83					
AUBUR	NDALE FL 33823		ţī	84	City		FL	85 Zip	Code
11. Pursuani	to the provisions of Sections 617.05	02 and 617.1508, Florida Statut	les, the ab	ove	e-named corp	poration submits this statement for the pilon's board of directors. I horeby accept	urpose of	changing It	is registered
	am familiar with, and accept the oblig	gations of, Section 617.0503, Fl	orida Statu	les	ano corporat	deria bodica of alliagions. I floridos abbop	t the opp	Sittle (IDIN DIS	rogistalos
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NO)	IE Registered	Age	nt signature requir	red when reinstating)	DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	DP	☐ DELETE	1.1 7(7)					Change	Addition
NAME.	GAIL PARKER		1.2 NAN						
STREET ADDRESS	3013 HELMS DR AUBURNDALE FL				ADDRESS				
CITY-ST-ZIP	DV NOOUNIOALC FL	DELETE	1.4 C(T) 2.1 T(T)		1-211			Change	Addition
NAME	GUTTERIDGE, ERNEST		2.2 NAM	Æ	}				
STREET ADDRESS	4064 LAKE MARIANNA DR		2.3 \$18	EET :	ADDRESS				
-CITY-ST-ZIP	WINTER HAVEN FL 33881		2. 4 CIT		ST-ZIP				
TITLE	.DG	OFTELE	3 1 THE		2	DOAR DONALD		Change	Audition
NAME	GAGNON, VIOLET		3.2 NAM		,	I PINE LANE			
STREET ADDRESS	7311 CYPRESS TRAIL DR POLK CITY FL 93868		1		ADDRESS	I PINE LANE AKE ALFRED, FL	538	50	
CITY-ST-ZIP	DT 05000	DELETE	3.4. C/T 4.1 T(1)		31-20°			Change	Addition
NAME	DANIEL D. SWING		4. 2 NA		1				
STREET ADDRESS	212 BRIDGERS AVE		1		address				
ITY-ST-ZIP	AUBURNDALE FL		4.4 CIT	Y-S1	T-ZIP				
TLE		DELETE	5.1 TiTL	.E		· ·- ·- ·- ·- ·-		Change	Addition
lame	<b>\</b>		5.2 NAN						
TREET ADDRESS					ADDRESS				
TTY-ST-ZIP		DELETE	5.4 CITY		T-ZIP			Change	Addition
AME	1	□ ptrcut	6.1 Titl 6.2 NAN		.			T country	T VOUIDDI
					ADDRESS				
	`				1				
. I do here	by certify that the information supplied	od with this filing does not quali	ly for the e	xer	motion stated	in Section 119.07(3)(i), Florida Statutes	s. I further	cerlify that	the
Information to the lam and	by certify that the information supplied the confidence on this annual report or officer or director of the corporation on the corporation of the	supplemental annual report is t or the receiver or trustee empow	6.4 City for the e true and ac vered to ex	r-si	motion stated	in Section 119.07(3)(i), Florida Statutes my signature spall have the same lega t as required by Chapter 617, Florida S	;. I further I effect as tatules; ar	cerlify that if made un- nd that my r	the der oa name

SIGNATULE 14 OURTS