## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: (

## **Secretary of State** 02-14-2007 90051 031 \*\*\*\*61.25 DOCUMENT # N9400003479 AUBURNDALE LIONS CLUB, INC. Principal Place of Business Mailing Address 40016794 226 BENNETT ST. P.O. BOX 1271 AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302007 Chg-NP CR2E037 (12/06) 4. FEI Number 65-0701034 /59-6139817 Applied For City & State City & State Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GUTTERIDGE, ERNEST** Street Address (P.O. Box Number is Not Acceptable) 4064 LAKE MARIANA DRIVE WINTER HAVEN, FL 33881 City 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. VD ☐ Delete TITLE XX Change TITLE Director SAMEN, CHARLES NAME Semen, Charles 150 OLD NICHOLS CIRCLE STREET ADDRESS STREET ADDRESS 150 Old Nichols Circle, Auburndale, FL CITY-ST-ZIP AUBURNDALE, FL 33823 CITY-ST-ZIP TITLE ☐ Delete Secretary NACARATO, CAROL NAME Nacaroto, Carol NAME STREET ADDRESS 3645 AVE. S. NW STREET ADDRESS 3645 Ave S, NW Winter Haven, FL CITY-ST-ZIP WINTER HAVEN, FL 33881 CiTY-ST-ZIP President DP TITLE TITLE ☐ Delete GUTTERIDGE, ERNEST NAME NAME Gutteridge, Ernest 4064 LAKE MARIANA DRIVE STREET ADDRESS STREET ADORESS 4064 Lake Mariana Drive, Winter Haven CITY -ST-ZIP CITY-ST-ZIP WINTER HAVEN, FL 33881 33881 Vice President ☐ Delete TITLE Change ☐ Addition ۷ħ TITLE NACARATO, FRANK NAME Nacarato, Frank NAME STREET ADDRESS STREET ADDRESS 3645 AVE. S NW 3645 Ave S NW WINTER HAVEN, FL 33881 CITY-ST-ZIP Winter Haven, FL 33881 CITY-ST-ZIP Change XX Addition XXX Delete TITLE Director TITLE COFER, JOHN W NAME NAME Cahill, Ann STREET ADDRESS STREET ADDRESS 5401 US HWT 17-92 W LOT 41 121 Holiday Lane, Auburndale, FL 33828 CITY-ST-ZIP HAINES CITY, FL 33844 CITY-ST-ZIP XX elete Director Change Addition TITLE TITLE EDWARDS, DUANE NAME Turcotte, Roger NAME STREET ADDRESS STREET ADDRESS 7749 CANTERBURY CIRCLE 689 Lake Howard Apt #3B 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

FILED Feb 14, 2007 8:00 am