SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $205)

NONPROFIT CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 JUL -6 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000005461 (8)

1. Corporation Name
WINTER GARDEN LIONS CLUB, INC.

Principal Place of Business	Mailing Address
120 SO. DILLARD STREET WINTER GARDEN FL 34777-0757	POST OFFICE BOX 770757 WINTER GARDEN FL 34777-0757

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/02/1994
3a. Date of Last Report:
4. FEI Number: 59-6151298 ☐ 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
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

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

9. Name and Address of Current Registered Agent

KING, EDWARD L
120 SO. DILLARD STREET
WINTER GARDEN FL 34777-0757

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 ______ Date ______

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY ST ZIP
P	SCHLEUPNER, TONY	3713 KITTHY HAWK AVENUE	WINTER GARDEN FL 34787
V	BACKLUND, GENE	1185 MONTEAGLE CIRCLE	APOPKA FL 32712
V	LACEY, JO ANN	226 S. HIGHLAND AVENUE	WINTER GARDEN FL 34787
V	SHIRLEY, PAUL	1665 SPRING RIDGE CIRCLE	WINTER GARDEN FL 34787
T	KING, EDWARD	30 W. SMITH STREET	WINTER GARDEN FL 34787
S	BEKEMEYER, GEORGE	1055 STORY ROAD	WINTER GARDEN FL 34787

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	TITLE	NAME	STREET ADDRESS	CITY ST ZIP	Change	Addition
1	P/D	SCHLEUPNER, TONY	3713 KITTHY HAWK AVENUE	WINTER GARDEN, FL 34787	☒	☐
2	V/D	BACKLUND, GENE	1185 MONTEAGLE CIRCLE	APOPKA, FL 32712	☒	☐
3	V/D	LACEY, JO ANN	226 S HIGHLAND AVENUE	WINTER GARDEN, FL 34787	☒	☐
4	V/D	SHIRLEY, PAUL	1665 SPRING RIDGE CIRCLE	WINTER GARDEN, FL 34787	☒	☐
5	T/D	KING, EDWARD	30 W. SMITH STREET	WINTER GARDEN, FL 34787	☒	☐
6	S/D	BEKEMEYER, GEORGE	1055 STORY ROAD	WINTER GARDEN, FL 34787	☒	☐

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: Edward L King
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 6/15/95 Daytime Phone #: 407-656-3233

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