

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000309

FILED  
Feb 25, 2010  
Secretary of State

**Entity Name:** BONITA SPRINGS LIONS CHARITIES, INC.

**Current Principal Place of Business:**

BONITA SPRINGS LION CLUB  
10322 PENNSYLVANIA AVENUE  
BONITA SPRINGS, FL 341366776

**New Principal Place of Business:**

BONITA SPRINGS LIONS CHARITIES, INC.  
10322 PENNSYLVANIA AVENUE  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

1204 YELLOWSTONE DRIVE  
NAPLES, FL 34110 US

**New Mailing Address:**

BONITA SPRINGS LIONS CHARITIES, INC.  
10322 PENNSYLVANIA AVENUE  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 65-0577075

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HARKINS, FRED W  
1204 YELLOOWSTONE DRIVE  
NAPLES, FL 34110 US

**Name and Address of New Registered Agent:**

HARKINS, FRED W TREASUR  
1204 YELLOOWSTONE DRIVE  
NAPLES, FL 34110 US

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: FRED W. HARKINS

02/25/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HILLIARD, ROBERT I PRES  
Address: 9621 VILLAGE VIEW, BLDG. 102  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP  
Name: MANSOLILLI, ALBERT VICE P  
Address: 939 BUNKER HILL DRIVE  
City-St-Zip: NAPLES, FL 34110 US

Title: S  
Name: HILLIARD, AMELIA M SEC  
Address: 9621 VILLAGE VIEW, BLDG. 102  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP  
Name: LAU, CATHERINE VICE P  
Address: 27036 ADRIANA CIRLE UNIT 101  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: D  
Name: SHIVEL, KENNETH JR.  
Address: 27482 PELICAN RIDGE CR.  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: T  
Name: HARKINS, FRED W  
Address: 1204 YELLOWSTONE DRIVE  
City-St-Zip: NAPLES, FL 34110 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: FRED W. HARKINS

TREA

02/25/2010

Electronic Signature of Signing Officer or Director

Date