

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000781

Entity Name: BRANDON LIONS, INC.

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

E.L.BING PARK
7210 TAYLOR ROAD
SEFFNER, FL 33584 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 1076
MANGO, FL 33550 US

New Mailing Address:

P.O. BOX 6638
SEFFNER, FL 33583 US

FEI Number: 59-3303504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TALAVERIA, ALBERT AD
1020 RED BUD CIRCLE
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

SALINAS, MELISSA PRES.
112 ALAFARA ST.
SEFFNER, FL 33584 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: MELISSA SALINAS

01/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: AD () Delete
Name: TALAVERIA, ALBERT
Address: 1020 RED BUD CIRCL
City-St-Zip: PLANT CITY, FL 33563 US

Title: AAD () Delete
Name: PEEL, BILLY
Address: 6510 EAST 24TH AVENUE
City-St-Zip: TAMPA, FL 33619 US

Title: TR () Delete
Name: BUSER, FAITH
Address: 1010 NORTH WARNELL STREET
City-St-Zip: PLANT CITY, FL 33563 US

Title: R () Delete
Name: COLEMAN, VALERIE
Address: 810 WALNUT DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: S (X) Delete
Name: ANDREL, WENDI
Address: 1504 SWILLEY ROAD
City-St-Zip: PLANT CITY, FL 33567 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SALINAS, MELISSA A PRES.
Address: 112 ALAFARA ST.
City-St-Zip: SEFFNER, FL 33584 US

Title: VP (X) Change () Addition
Name: WHITMORE, DEBRA VP
Address: 6515 IKE SMITH RD.
City-St-Zip: PLANT CITY, FL 33565 US

Title: VP2 (X) Change () Addition
Name: PEEL, BILLY 2ND VP
Address: 6510 E. 24TH AVE
City-St-Zip: TAMPA, FL 33619 US

Title: TR (X) Change () Addition
Name: BENNINGTON, HEATHER TREAS
Address: 9174 WOOD TERRACE DR.
City-St-Zip: TAMPA, FL 33637

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MELISSA SALINAS

PRES

01/23/2009

Electronic Signature of Signing Officer or Director

Date