

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90121 024 ****70.00

DOCUMENT # **N 95000001533**

1. Entity Name

INVERNESS LIONS CHARITIES, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

John and Mary's Sweetwatercote

3. Mailing Address

PO Box 295

Suite, Apt. #, etc.

3850 E. GULF Lake

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

INVERNESS FL

City & State

INVERNESS FL

4. FEI Number

59 3181382

Applied For

Not Applicable

Zip

34452

Country

USA

Zip

34451

Country

USA

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

EMERSON Robert

Street Address (P.O. Box Number is Not Acceptable)

4122 S. BIGAL PT

City

INVERNESS

FL

Zip Code

34452

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.

SIGNATURE

Robt S. Emerson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-6-02

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
ANDREICHUK Gregory
1112 E BUCKNELL
INVERNESS, FL 34450 US**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
NUSSO CATHY
6255 E. MALVERNE
INVERNESS FL 34452 US**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**V
SUARINO DENNIS
3888 N STIRRUP DRIVE
BEVERLY Hills FL 34465 US**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**V
TRODDEN Bill
2822 N. ATTEBURY PT.
HERNANDO FL 34442 US**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
TRODDEN CLARE
2822 N. ATTEBURY PT.
HERNANDO, FL 34442**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
MARY EHRESMAN
316 Red Rose Lane
INVERNESS FL 34452**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary Ehresman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/02
Date

3523412063
Daytime Phone #

CR2E037B (12/01)