

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002210

FILED
Jan 20, 2010
Secretary of State

Entity Name: JACKSONVILLE BEACHES LIONS CLUB, INC.

Current Principal Place of Business:

319 LIONS RD
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 50555
JACKSONVILLE BEACH, FL 32240

New Mailing Address:

FEI Number: 59-1265511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MATTESON, MICHELLE C TR
14274 CRYSTAL COVE DRIVE SOUTH
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BAKER, RICHARD J
Address: 1005 22ND STREET NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP
Name: FISSETTE, CHARLES
Address: 4524 CHARLES BENNETT DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: ST
Name: SCHAAF, PATRICIA
Address: 1218 NIPIGON AVE. SOUTH
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: TR
Name: MATTESON, MICHELLE C
Address: 14274 CRYSTAL COVE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32224

Title: D
Name: FARRELL, THERESA
Address: 4265 COQUINA DRIVE
City-St-Zip: JACKSONVILLE, FL 32250

Title: D
Name: CARROLL, CHARLES R
Address: 1841 NORTH SHERRY DRIVE
City-St-Zip: ATLANTIC BEACH, FL 32233

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: MICHELLE C. MATTESON

TR

01/20/2010

Electronic Signature of Signing Officer or Director

Date