

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002322

FILED  
Mar 27, 2009  
Secretary of State

**Entity Name:** THE GREATER PINE ISLAND LIONS FOUNDATION, INC.

**Current Principal Place of Business:**

2319 BANANA ST  
SAINT JAMES CITY, FL 33956

**New Principal Place of Business:**

3055 SKIPPER LANE  
SAINT JAMES CITY, FL 33956 US

**Current Mailing Address:**

PO BOX 734  
SAINT JAMES CITY, FL 33956

**New Mailing Address:**

PO BOX 734  
ST. JAMES CITY, FL 33956 US

**FEI Number:** 65-0584799

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OSBORNE, LESLIE  
2319 BANANA ST  
SAINT JAMES CITY, FL 33956 US

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

CAMPBELL, WILLIAM E TREAS  
10466 TROTWOOD AVENUE  
ST. JAMES CITY, FL 33956 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: WILLIAM E. CAMPBELL

03/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT3 ( ) Delete  
Name: BARRETT, VIOLA  
Address: 4974 PORKY LANE  
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: DS ( ) Delete  
Name: OSBORN, LESLIE  
Address: 2319 BANANA ST  
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: D ( ) Delete  
Name: MARTIN, DONNA  
Address: P.O. BOX 465  
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: DVP ( ) Delete  
Name: WOODHEAD, RUBY  
Address: 2277 SAPADILLA LANE  
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: VON BURG, MARY M  
Address: 3055 SKIPPER LANE  
City-St-Zip: ST. JAMES CITY, FL 33956 US

Title: DVP (X) Change ( ) Addition  
Name: WOODHEAD, RUBY P  
Address: 2277 SAPADILLA LANE  
City-St-Zip: ST. JAMES CITY, FL 33956 US

Title: D (X) Change ( ) Addition  
Name: MARTIN, DONNA  
Address: P.O. BOX 465  
City-St-Zip: SAINT JAMES CITY, FL 33956 US

Title: DT (X) Change ( ) Addition  
Name: CAMPBELL, WILLIAM E  
Address: 10466 TROTWOOD AVENUE  
City-St-Zip: ST. JAMES CITY, FL 33956 US

Title: D ( ) Change (X) Addition  
Name: OSBORNE, LESLIE  
Address: 2319 BANANA STREET  
City-St-Zip: ST. JAMES CITY, FL 33956 US

Title: D ( ) Change (X) Addition  
Name: BARRETT, VIOLA  
Address: 4974 PORKY LANE  
City-St-Zip: ST. JAMES CITY, FL 33956 US

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: WILLIAM E. CAMPBELL

DT

03/27/2009

Electronic Signature of Signing Officer or Director

Date