


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90081 039 ****61.25

DOCUMENT # N95000003544
 1. Entity Name
THE PALM BAY HAPPY LIONS FOUNDATION, INC.



Principal Place of Business Mailing Address
 POST OFFICE BOX 0256 POST OFFICE BOX 0256
 PALM BAY FL 32906-0256 PALM BAY FL 32906-0256



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

1st MOORE CR2E037 (10/05)

4. FEI Number **59-3327911** Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Name and Address of Current Registered Agent
SEYFERT, GEORGE
1425 SCEPTER COURT NE
PALM BAY FL 32905

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

B. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE *George Seyfert* *George Seyfert, Pres.* **Feb. 28, 2006**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUSLINGER, JOHN 349 RILEY AVE NE PALM BAY FL 32907 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THORNE, ST. CLAIR 401 JUPITER BLVD NW PALM BAY FL 32907 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEST, BUELAH J 2122 ADVANA PALM BAY FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOO, DAPHNE 1625 ARCOT CIRCLE NE PALM BAY FL 32905 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SEYFERT, GEORGE R 1425 SCEPTER CT NE PALM BAY FL 32905 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1V MORSE, LEO 2657 INDIAN RIVER DRIVE PALM BAY FL 32905 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treas. Clement, Nathaniel 132 Lake Oak Lake Rd Melbourne, FL 32901 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Seyfert, George 1425 Scepter Court NE Palm Bay, FL 32905 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. IV Chung-A-Fung 384 Humbert street NE Palm Bay, FL 32907 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. LaVeist, Daisey 491 Candlestick Ave NE Palm Bay FL 32907 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George Seyfert* *George Seyfert* **2/28/06** **321-723-0930**