

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005054

FILED
Mar 18, 2005
Secretary of State

Entity Name: THE BRADENTON LIONS FOUNDATION, INC.

Current Principal Place of Business:

POST OFFICE BOX 945
BRADENTON, FL 34206

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 945
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 65-0619212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOULD, PENELOPE L
8404 BRANDEIS CIR W
SARASOTA, FL 34243 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: D () Delete
Name: BLOCK, CARL
Address: 4269 66TH ST CIR
City-St-Zip: BRADENTON, FL 34209

Title: 2VP () Delete
Name: THOMAS, BRAD
Address: 4125 LAKE BAYSHORE DR. C-415
City-St-Zip: BRADENTON, FL 34205

Title: P () Delete
Name: SHERMAN, FREDERICK
Address: 6050 FOCHSTREET NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: P () Delete
Name: SHERMAN, FRED
Address: 6050 FOCH ST., NE
City-St-Zip: ST. PETERSBURG, FL 33703

Title: T () Delete
Name: DAGEENAI, PIERRE
Address: 1402 MAGELIAN DR
City-St-Zip: SARASOTA, FL 34243

Title: S () Delete
Name: GOULD, PENNY
Address: 8404 BRANDEIS CIR W
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PENELOPE GOULD

SEC

03/18/2005

Electronic Signature of Signing Officer or Director

Date