

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90045 037 *****61.25

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1. Entity Name

LIONS FOUNDATION OF ST. PETE BEACH, INC.



Principal Place of Business

POST OFFICE BOX 66193
ST. PETE BEACH FL 33736

Mailing Address

POST OFFICE BOX 66193
ST. PETE BEACH FL 33736

40013039



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3409421

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ENTWISTLE, CHARLES
10117 YACHT CLUB DRIVE
TREASURE ISLAND FL 33706-3152

Name
NEWARK, PATRICIA

Street Address (P.O. Box Number is Not Acceptable)
4545 PLAZA WAY

ST. PETE BEACH, FL. 33706-2513

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE *Patricia Newark* PATRICIA NEWARK TUESDAY FEBRUARY 1, 2005

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, 2005**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME NEWARK, PATRICIA
STREET ADDRESS 4545 PLAZA WAY
CITY-ST-ZIP SAINT PETERSBURG FL 33706-2513

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HELD, FRED
STREET ADDRESS 7700 SUN ISLAND DRIVE #601
CITY-ST-ZIP S. PASADENA FL 33707

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME ENTWISTLE, CHARLES
STREET ADDRESS 10117 YACHT CLUB DRIVE
CITY-ST-ZIP TREASURE ISLAND FL 33706-3152

TITLE D. ☐ Change ☒ Addition
NAME STEBELTON, AGNES
STREET ADDRESS 1868 SHORE DR. S., #311
CITY-ST-ZIP SOUTH PASADENA, FL. 33707

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia Newark*