## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

CITY-ST-ZIP

N96000004171 (2)

LIONS AND TIGERS AND BEARS, OH MY CORPORATION

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Principal Plac	Suite, Apt. #, etc. Suite, Apt. #, etc. 27									E finations bein court and the salit aster and the party and substitution of the salit and the salit	
		ST								S. Certificate of Status Desired  S. Certificate of Status Desired  G. Election Campaign Financing Trust Fund Contribution  S. Tolde Added to Fees  S. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No  10. Name and Address of New Registered Agent  S. (P.O. Box Number is Not Acceptable)  FL  SS (P.O. Box Number is Not Acceptable)  FL  SS Zip Code  reation submits this statement for the purpose of changing its registered is board of directors. I hereby accept the appointment as registered appointment appointment as registered appointment app	
										00/07/1006   / /	
		ess	2	a. Mailing						4. FEI Number Applied For	
21 Same				26						65-0677054 Not Applicable	
Suite, Apt. #, etc. Suite										5 Certificate of Status Decired \$8.75 Additional	
22							Fee Required				
_ `	te		City & State						<del>_</del>		
23				28							
Zip	-	Country	<u> </u>	Zip T		——————————————————————————————————————	ountry	1			
24	25 Name and Address of Curren			29 30 September 20 20 20 20 20 20 20 20 20 20 20 20 20							
9. Name and Address of Current Registered Agent							81	Name	~~~	10. Halile alla Address of Helf Registered Agent	
***		^					Ľ	140000		MIA	
MCGOWAN, DAVID P 8512 43RD AVENUE DR. WEST BRADENTON FL 34209							82	Street	Address (P.O. Box Number is Not Acceptable)		
							83	·-···			
BHAUE	NION PL 34	209					"				
					84	,	FL   T				
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statules, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 617.0503, Florid							abov ed b	e-named y the cor	corpo poratio	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
_	am ramınar witi	i, and accept the d			1 1				L_	9.2.97	
SIGNATURE	Signature, lyped o	r printed hame of registere			<u> </u>	TE Registe	red Ao	ent signature	e required	red when reinstaling) DATE	
12.		OFFICERS				13					
TITLE		10R.(D)			DELETE	1.1	TETLE		201		
NAME	ME DOROTHY MCGOW				MAN			1.2 NAME		USAN PETTIGREW	
STREET ADDRESS 116 CEDAR AVE				·			1.3 STREET ADDRESS		94	4 STELLA ROAD	
CITY-ST-ZIP	NATIC	1760	<b>6</b> 0			1.4 CHTY-ST-ZIP		BE	ELLINGHAM MA 02019		
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CITY-ST-ZIP	BRADENTON FL										
TITLE					☐ DELETE	4.1	TITLE			☐ Change ☐ Additio	
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CITY-ST-ZIP	<u> </u>					5.4	CITY-S	ST-ZIP	L_		
TITLE					DELETE	6.1	TITLE		1	Change Addition	
NAME						6.2	NAME				
STREET ADDRESS	[					6.3	STREET	ADDRESS			

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an allechment with an address.

**FILED** 

Sep 10 1997 8:00am

Secretary of State

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