

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004673

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** THE LAKE PLACID LIONS CLUB, INC.

**Current Principal Place of Business:**

125 TORTOISE RD  
SEBRING, FL 33876 US

**New Principal Place of Business:**

**Current Mailing Address:**

125 TORTOISE RD  
SEBRING, FL 33876 US

**New Mailing Address:**

**FEI Number:** 65-0693314

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREIG, DOLORES M  
102 COUNTRY CLUB DRIVE  
LAKE PLACID, FL 33852 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  
**Name:** RABIDEAU, GEORGE  
**Address:** 458 SKYLARK DR  
**City-St-Zip:** SEBRING, FL 33875

**Title:** SD  
**Name:** GALM, JUDY  
**Address:** 125 TORTOISE RD  
**City-St-Zip:** SEBRING, FL 33876

**Title:** TD  
**Name:** CUNNINGHAM, EDITH  
**Address:** P O BOX 836  
**City-St-Zip:** LAKE PLACID, FL 33862

**Title:** D  
**Name:** LAMBERT, MILES  
**Address:** P.O. BOX 836  
**City-St-Zip:** LAKE PLACID, FL 33862

**Title:** D  
**Name:** THAYER, GLENN R  
**Address:** 100 THAYER LANE  
**City-St-Zip:** LAKE PLACID, FL 33852

**Title:** PD  
**Name:** BREIG, DOLORES M  
**Address:** 102 COUNTRY CLUB DR  
**City-St-Zip:** LAKE PLACID, FL 33852

I hereby 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 all other like empowered.

**SIGNATURE:** JUDITH E. GALM

SD

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date