

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000006053 (9)
 1. Corporation Name
THE MAITLAND LIONS FOUNDATION, INC.



Principal Place of Business 237 LOOKOUT PLACE, SUITE 100 MAITLAND FL 32751	Mailing Address 237 LOOKOUT PLACE, SUITE 100 MAITLAND FL 32751
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3. Date Incorporated or Qualified
10/27/1997

4. FEI Number 59 347 8058	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent
ICARDI, ALDO
237 LOOKOUT PLACE, SUITE 100
MAITLAND FL 32751

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ELLIOTT, JACK	1.1 TITLE	VD Ellis, Les
NAME	237 LOOKOUT PLACE, SUITE 100	1.2 NAME	250 Nottoway Trail
STREET ADDRESS	MAITLAND FL 32751	1.3 STREET ADDRESS	Maitland, FL 32751
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD WHITEFIELD, GERRY	2.1 TITLE	VD Jackson, Arlis
NAME	237 LOOKOUT PLACE, SUITE 100	2.2 NAME	1140 S. Orlando Ave I-1
STREET ADDRESS	MAITLAND FL 32751	2.3 STREET ADDRESS	Maitland, FL 32751
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VD MARTENS, ALAN	3.1 TITLE	D Frank Kozumplik
NAME	237 LOOKOUT PLACE, SUITE 100	3.2 NAME	1140 Willowbrook Trail
STREET ADDRESS	MAITLAND FL 32751	3.3 STREET ADDRESS	Maitland, FL 32751
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VD ROSSER, LYNN	4.1 TITLE	D Charles Barnes
NAME	237 LOOKOUT PLACE, SUITE 100	4.2 NAME	1116 Shaffer Trail
STREET ADDRESS	MAITLAND FL 32751	4.3 STREET ADDRESS	Oviedo, FL 32765
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	SD REDMOND, LARRY	5.1 TITLE	D Jim Whitaker
NAME	237 LOOKOUT PLACE, SUITE 100	5.2 NAME	1109 Turner Road
STREET ADDRESS	MAITLAND FL 32751	5.3 STREET ADDRESS	Winter Park, FL 32789
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	TD MAGGIACOMO, HENRY	6.1 TITLE	
NAME	237 LOOKOUT PLACE, SUITE 100	6.2 NAME	
STREET ADDRESS	MAITLAND FL 32751	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 attachment with an address.

SIGNATURE: *Jack Elliott, President* 4/9/98

CR2E037 (10/97)