

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90163 017 ****61.25

DOCUMENT # N97000006053



1. Entity Name
THE MAITLAND LIONS FOUNDATION, INC.

Principal Place of Business Mailing Address
549 WYMORE RD NORTH 549 WYMORE RD NORTH
STE 109 STE 109
MAITLAND FL 32751 MAITLAND FL 32751

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-3478058**

Applied For
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JEFFERY, ICARDI
549 WYMORE NORTH STE 109
MAITLAND FL 32751

Name
Street Address (P.O. Box Number is Not Acceptable)
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: 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

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	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	VD SHAFFER, PHYLLIS	2932 NICHOLAS LANE	APOPKA FL 32703				
	D KOZUMPLIK, FRANK	1140 WILLOWBROOK TR	MAITLAND FL 32751				
	D BARNES, CHARLES	1553 MAYFLOWER CT	WINTER PARK FL 32792				
	D WHITAKER, JIM	1109 TURNER RD	WINTER PARK FL 32789				
	TD MAGGIACOMO, HENRY	237 LOOKOUT PLACE, SUITE 100 MAITLAND FL 32751				1780 Tonto Trail Maitland, FL 32751	

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: *Henry Maggiacomo* HENRY MAGGIACOMO 1/31/03 407-629-0351

CR2E037 (10/02)