

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003084

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE BEVERLY HILLS LIONS FOUNDATION, INC.

Current Principal Place of Business:

72 CIVIC CIRCLE
BEVERLY HILLS, FL 34465

New Principal Place of Business:

Current Mailing Address:

P O BOX 640122
BEVERLY HILLS, FL 34465

New Mailing Address:

P O BOX 640122
BEVERLY HILLS, FL 34464

FEI Number: 59-3513615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIZE, THOMAS R
4254 W. PIUTE DR
BEVERLY HILLS, FL 34465 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: P () Delete
Name: MIZE, JANET
Address: 4254 W PIUTE DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: V () Delete
Name: MIZE, THOMAS
Address: 4254 W. PIUTE DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: T () Delete
Name: MIZE, JANET
Address: 4254 W. PIUTE DR
City-St-Zip: BEVERLY HILLS, FL 34465

Title: V () Delete
Name: O'CONNELL, RAY
Address: 7 NORTH MELBOURNE ST
City-St-Zip: BEVERLY HILLS, FL 34465

Title: V () Delete
Name: MORRISTON, WILLIAM
Address: 2061 NW 18TH ST
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: THOMPSON, AMY
Address: 210 S. MONROE ST.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: BELLIVEAU, SHIRLEY
Address: 4371 N. MAE WEST WAY
City-St-Zip: BEVERLY HILLS, FL 34465

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANET MIZE

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date