

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21176

Entity Name: GAINESVILLE LIONS CLUB, INC.**Current Principal Place of Business:**JASON'S DELI
6791 W NEWBERRY RD
GAINESVILLE, FL 32605**Current Mailing Address:**PO BOX 357058
GAINESVILLE, FL 32635 US**FEI Number: 59-6153304****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WIATROWSKI, SANDRA
8179 NE 30 STREET
HIGH SPRINGS, FL 32643 US*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

Officer/Director Detail :

Title	P
Name	HOLTON, ROBERT
Address	P.O. BOX 1344
City-State-Zip:	WELAKA FL 32193

Title	VP
Name	WALTER, CARL
Address	8113 NW 25TH LANE
City-State-Zip:	GAINESVILLE FL 32606

Title	S
Name	HOLTON, MARJORIE
Address	P.O. BOX 1344
City-State-Zip:	WELAKA FL 32193

Title	D
Name	WALTER, CARL C
Address	8113 NW 25TH LANE
City-State-Zip:	GAINESVILLE FL 32607

Title	T
Name	WIATROWSKI, SANDRA
Address	8179 NE 30 STREET
City-State-Zip:	HIGH SPRINGS FL 32643

Title	D
Name	SCHOENFELD, DEAN
Address	3217 NW 18TH AVE.
City-State-Zip:	GAINESVILLE FL 32605

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: SANDRA WIATROWSKI**TREASURER****04/23/2013**

Electronic Signature of Signing Officer/Director Detail

Date