


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90022 045 ****61.25

DOCUMENT # 711250
 1. Entity Name
PUNTA GORDA GARDEN CLUB, INC.



Principal Place of Business Mailing Address
BAYFRONT CENTER / FIRST UNITED P O BOX 511167
750 W RETTA ESPLANDE / METHODIST CHURCH PUNTA GORDA, FL 33951-1167 US
PUNTA GORDA, FL 33950 US 507 W. MARION AVE

2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

03092004 Chg-NP CR2E037 (10/03)
 4. FEI Number **59-1612027** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
HONOUR, CAROLYN
1211 CORONADO DRIVE
PUNTA GORDA, FL 33950

7. Name and Address of New Registered Agent
 Name **ELISE HAYMANS**
 Street Address (P.O. Box Number is Not Acceptable)
9160 BURNT STORE RD
 City **PUNTA GORDA FL** Zip Code **33950**

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: *Carolyn Honour*
 Signature: *Elise Haymans* DATE: **3-17-04**

Filing Fee is **\$61.25** Due by **May 1, 2004**
 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

TITLE	P	<input type="checkbox"/> Delete
NAME	HONOUR, CAROLYN	
STREET ADDRESS	1211 CORONADO DRIVE	
CITY-ST-ZIP	PUNTA GORDA, FL 339506307	
TITLE	S	<input type="checkbox"/> Delete
NAME	SIMPSON, ANNE	
STREET ADDRESS	421 FIREBALL CT	
CITY-ST-ZIP	PUNTA GORDA, FL 339504008	
TITLE	T	<input type="checkbox"/> Delete
NAME	CURNOW, LIBBY	
STREET ADDRESS	3438 PENNY ROYAL RD	
CITY-ST-ZIP	PORT CHARLOTTE, FL 339534603	
TITLE	D	<input type="checkbox"/> Delete
NAME	CURNOW, LIBBY	
STREET ADDRESS	3438 PENNYROYAL ROAD	
CITY-ST-ZIP	PORT CHARLOTTE, FL 339534603	
TITLE	D	<input type="checkbox"/> Delete
NAME	NAYLOR, EMILY	
STREET ADDRESS	210 HARVEY STREET	
CITY-ST-ZIP	PUNTA GORDA, FL 339504411	
TITLE	D	<input type="checkbox"/> Delete
NAME	VERNON, MARY LOU	
STREET ADDRESS	2500 RIO TIBER DR.	
CITY-ST-ZIP	PUNTA GORDA, FL 339506324	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELISE HAYMANS	
STREET ADDRESS	9160 BURNT STORE RD	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOYCE TILDEN	
STREET ADDRESS	2742 ST. THOMAS DR	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAROLYN HONOUR	
STREET ADDRESS	1211 CORONADO DR	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAROLYN HONOUR	
STREET ADDRESS	1211 CORONADO DR	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUZANNAH WOELTERS	
STREET ADDRESS	260 LIDA DR.	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Elise Haymans* DATE: **3-17-04**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #