

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004131

FILED
Jun 26, 2009
Secretary of State

Entity Name: WEST BOCA WOMEN OF THE MOOSE #2273 INC.

Current Principal Place of Business:

131 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

131 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 26-0079801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRELSFORD, DAINNE
131 N. POWERLINE ROAD
DEERFIELD BEACH, FL 33442 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: PD () Delete
Name: ROBINSON, SUSAN
Address: 131 N. POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VP () Delete
Name: STOLTZ, PAT
Address: 131 N. POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T () Delete
Name: BRESFORD, DIANNE
Address: 131 N. POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S () Delete
Name: WERNER, BARBARA
Address: 131 N POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: C () Delete
Name: VINCELLI, JANE
Address: 131 N POWERLINE RD
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STOLTZ, PATRICIA
Address: 131 N. POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VP (X) Change () Addition
Name: WERNER, BARBARA
Address: 131 N. POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

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

Title: S (X) Change () Addition
Name: VARIE-BRIGHT, DEBBIE
Address: 131 N POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33442

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

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: DIANNE BRELSFORD

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06/26/2009

Electronic Signature of Signing Officer or Director

_____ Date