## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47059

FILED Apr 30, 2009 Secretary of State

Entity Name: GARDEN CLUB OF FORT PIERCE INC.

Current Principal Place of Business:		New Principal Place of Business:		
11 PARK T PIERC	WAY E, FL 34950			
urrent N	lailing Address	:	New Mailing Addres	ss:
09 HOLL ORT PIE	Y AVE. RCE, FL 34982	US		
≣l Number	: 65-0137765	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	l Address of Cเ	rrent Registered Agent:	Name and Address	of New Registered Agent:
OUNG, F 09 HOLL				
ORT PIE ne above			ourpose of changing its registere	ed office or registered agent, or both
ORT PIE ne above the State	named entity sue of Florida.		ourpose of changing its registere	ed office or registered agent, or both
ORT PIE ne above the State	named entity sue of Florida.			ed office or registered agent, or both  Date
ORT PIE he above the State	named entity sue of Florida.	ubmits this statement for the personal statement	ent	
ORT PIE ne above the State GNATUI	named entity sue of Florida.  RE: Electronic  S AND DIRECT	c Signature of Registered Agones: Delete MRS. E DR.	ent	Date
DRT PIE ne above the State GNATUF FFICER: le: le: ldress:	e named entity sue of Florida.  RE: Electronic  S AND DIRECT  PD () I  PARKIN, DIXIE IN  1705 BAYSHORE FORT PIERCE, F	Delete  ORS:  Delete  JRS.  Delete  JRS.  DR.  L 34949  Delete  JR.  Delete	ent  ADDITIONS/CHANG  Title: Name: Address:	Date BES TO OFFICERS AND DIRECTO
DRT PIE  ne above the State GNATUI  FFICER: le: me: dress: dress: le: me: dress:	e named entity sue of Florida.  RE: Electronic  S AND DIRECT  PD () DE  PARKIN, DIXIE NO  1705 BAYSHORE  FORT PIERCE, F  V () DE  GREENE, DOTTY  5802 DEER RUN  FORT PIERCE, F	c Signature of Registered Agones: Delete //RS. E DR. L 34949 Delete // DR. L 34951 Delete Y S RIVER DR.	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

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: ROSALIE YOUNG TD 04/30/2009