

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702580

FILED
Mar 06, 2009
Secretary of State

Entity Name: EVERGLADES AMATEUR RADIO CLUB, INC.

Current Principal Place of Business:

P. O. BOX 113
HOMESTEAD, FL 330300113

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 113
HOMESTEAD, FL 330300113

New Mailing Address:

FEI Number: 65-0028129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARKEY, WILLIAM
13266 SW 265 TERR
NARANJA, FL 33032 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: STARKLEY, WILLIAM
Address: 13266 SW 165 TERR
City-St-Zip: HOMESTEAD, FL 33032

Title: S () Delete
Name: APPLETON, WILLIAM C
Address: 29470 SW 193 AVE
City-St-Zip: HOMESTEAD, FL 330330

Title: V () Delete
Name: MICHAEL, RICHARD L
Address: 14650 SW 124 PL
City-St-Zip: MIAMI, FL 33186

Title: T () Delete
Name: DAENZER, JOHN C
Address: 29 ANGELFISH CAY DR
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: SABIN, TODD A
Address: 92157 OS HWY 11
City-St-Zip: TAVERNIER, FL 33070

Title: D () Delete
Name: THOMPSON, HOMER T
Address: 9755 THANKSGIVING DR
City-St-Zip: MIAMI, FL 33157

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: () Change () Addition
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City-St-Zip:

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

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: JOHN C DAENZER

T

03/06/2009

Electronic Signature of Signing Officer or Director

Date