

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702637

FILED
Mar 09, 2008
Secretary of State

Entity Name: THE PROGRESSIVE CIVIC LEAGUE OF GIFFORD, FLORIDA, INC.

Current Principal Place of Business:

4855 43RD AVE.
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5102
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 59-1783876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, SAMUEL A DR.
4206 - 41ST STREET
VERO BEACH, FL 32967 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: VD () Delete
Name: PERSON, SYLVIA
Address: 5855 59TH COURT
City-St-Zip: VERO BEACH, FL 32967

Title: TD () Delete
Name: HART, VICTOR SR.
Address: 4635 34TH AVE
City-St-Zip: VERO BEACH, FL 32967

Title: PD () Delete
Name: IDLETTE, JOE N III
Address: 4570-57TH AVE.
City-St-Zip: VERO BEACH, FL 32967

Title: SD () Delete
Name: PERRY, AUNDREA
Address: 4615 43RD CT
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: WILLIAMS, LINDEL
Address: 4550 57TH LANE
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: PERSON, SYLVIA
Address: 5855 59TH COURT
City-St-Zip: VERO BEACH, FL 32967 US

Title: D (X) Change () Addition
Name: HART, VICTOR SR.
Address: 4635 34TH AVE
City-St-Zip: VERO BEACH, FL 32967 US

Title: PD (X) Change () Addition
Name: IDLETTE, JOE N III
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Name: PERRY, AUNDREA
Address: 4615 43RD CT
City-St-Zip: VERO BEACH, FL 32967 US

Title: TD (X) Change () Addition
Name: WILLIAMS, LINDEL
Address: 4550 57TH LANE
City-St-Zip: VERO BEACH, FL 32967 US

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: JOE N. IDLETTE III

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03/09/2008

Electronic Signature of Signing Officer or Director

Date