

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703087

FILED
Feb 15, 2011
Secretary of State

Entity Name: CRICKETTE CLUB OF BARTOW INC.

Current Principal Place of Business:

2250 S FLORAL AVE
1127 LONGWOOD OAKS BLVD
LAKELAND, FL 33811 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 584
1127 LONGWOOD OAKS BLVD
BARTOW, FL 33831 US

New Mailing Address:

FEI Number: 59-1026551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRAINOR, RUTH C
1127 LONGWOOD OAKS BLVD
LAKELAND, FL 33811 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
Name: CLARK, EMILY SPATH
Address: 1371 LAUREL GLEN DR
City-St-Zip: BARTOW, FL 33830

Title: VP
Name: GITHENS, MICHELL
Address: 595 WEST MAIN STREET
City-St-Zip: BARTOW, FL 33830

Title: TD
Name: TRAINOR, RUTH C
Address: 1127 LONGWOOD OAKS BLVD
City-St-Zip: LAKELAND, FL 33811

Title: 1VP
Name: BROOM, SHEILA
Address: 870 SQUARE LAKE
City-St-Zip: BARTOW, FL 33830

Title: RS
Name: DUVAL, KATHERINE
Address: 1190 S FLORAL AVE
City-St-Zip: BARTOW, FL 33830

Title: CS
Name: CHINAULT, REBECCA
Address: 1335 HWY 17 S
City-St-Zip: BARTOW, FL 33830

I hereby 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 all other like empowered.

SIGNATURE: RUTH C TRAINOR

TRES

02/15/2011

Electronic Signature of Signing Officer or Director

Date