

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703261

FILED
Apr 20, 2009
Secretary of State

Entity Name: WINTER PARK GARDEN CLUB INC

Current Principal Place of Business:

1385 S DENNING DR
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

MEAD BOTANNICAL GARDENS
PO BOX 272
WINTER PARK, FL 32790

New Mailing Address:

FEI Number: 59-6020796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITLEY + CO., PA
601 N. FERNCREEK AVE., STE 200
ORLANDO, FL 32853 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: MCKINNEY, VIVIENNE
Address: 520 VIGRINIA DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: V () Delete
Name: FURBISH, KIM
Address: 2112 SHADY LANE
City-St-Zip: GENEVA, FL 32732

Title: S () Delete
Name: BAXTER, VALERIE
Address: 1516 NOHINGHAM STREET
City-St-Zip: ORLANDO, FL 328031108

Title: TD () Delete
Name: REKER, JAN
Address: 1660 JOELINE CT.
City-St-Zip: WINTER PARK, FL 327895916

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PESCH, CYNTHIA
Address: 662 OSCEOLA AVENUE #204
City-St-Zip: WINTER PARK, FL 32789

Title: V (X) Change () Addition
Name: HUTCHINSON, ELLEN
Address: 8889 ASPEN AVENUE
City-St-Zip: ORLANDO, FL 32817

Title: S (X) Change () Addition
Name: BUCHANAN, JOAN
Address: 3223 RENLEE PLACE
City-St-Zip: ORLANDO, FL 32803

Title: TD (X) Change () Addition
Name: REKER, JAN
Address: 1660 JOELINE CT.
City-St-Zip: WINTER PARK, FL 32789

Title: VD () Change (X) Addition
Name: JOHNS, SARA
Address: 350 BRIARWOOD DRIVE
City-St-Zip: WINTER PARK, FL 32789

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: JANET M REKER

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04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date