

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704337

FILED
Jan 15, 2010
Secretary of State

Entity Name: LEMON BAY GARDEN CLUB INC

Current Principal Place of Business:

380 YALE ST
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1176
ENGLEWOOD, FL 34295 US

New Mailing Address:

FEI Number: 59-6169744 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MEARS, BARBARA M
128 JOSE GASPAS DRIVE
ENGLEWOOD, FL 34223 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: SCHILKE, LINDA
Address: 450 ARTIST AVENUE
City-St-Zip: ENGLEWOOD, FL 342232736

Title: V1
Name: JACOBSON, BARBARA
Address: 21 SOUTHWIND DRIVE
City-St-Zip: ENGLEWOOD, FL 342233131

Title: V2
Name: MYERS, KATHY
Address: 1941 MISSISSIPPI AVE
City-St-Zip: ENGLEWOOD, FL 342295526

Title: T
Name: MEARS, BARBARA
Address: 128 JOSE CASPER DR.
City-St-Zip: ENGLEWOOD, FL 342233865

Title: CS
Name: LAVENDER, ARDITH
Address: 402 BLUE SPRINGS CT.
City-St-Zip: ENGLEWOOD, FL 342236522

Title: RS
Name: AULT, SHERRIE
Address: 316 S. MANO STREET
City-St-Zip: ENGLEWOOD, FL 342233660

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: BARBARA M. MEARS

T

01/15/2010

Electronic Signature of Signing Officer or Director

_____ Date