

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710415

FILED
Jan 09, 2012
Secretary of State

Entity Name: EL JOBEAN COMMUNITY LEAGUE, INC.

Current Principal Place of Business:

14344 JAMISON WAY
EL JOBEAN, FL 33927

New Principal Place of Business:

Current Mailing Address:

14344 JAMISON WAY
P.O. BOX 27123
EL JOBEAN, FL 33927 US

New Mailing Address:

FEI Number: 59-2793800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUTTER, BEVERLY L
18198 GRIFFEN AVE
PORT CHARLOTTE, FL 33948 US

Name and Address of New Registered Agent:

CUTTER, BEVERLY L
14501 KIPLING CT.
PORT CHARLOTTE, FL 33953 US

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:

01/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CUTTER, BEVERLY L
Address: 14501 KIPLING CT.
City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: VP
Name: SPENCE, LORANDA O
Address: 4144 NETTLE RD.
City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: S
Name: HERBERT, RUTH A
Address: 14482 STEPHENS ROAD
City-St-Zip: ,PORT CHARLOTTE, FL 33953 US

Title: T
Name: MYERS, DAVID
Address: 14276 RIVER BEACH DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: D
Name: GRIMM, IRENE
Address: 221 FREEPORT CT.
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: D
Name: GILES, GAIL
Address: 3850 BRAVO ROAD
City-St-Zip: PORT CHARLOTTE, FL 33953 US

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: BEVERLY L. CUTTER

PRES

01/09/2012

Electronic Signature of Signing Officer or Director

Date