

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721048

FILED
May 11, 2009
Secretary of State

Entity Name: PENINSULA WOMAN'S CLUB

Current Principal Place of Business:

415 S PENINSULA DR
DAYTONA BEACH, FL 321184629

New Principal Place of Business:

Current Mailing Address:

C/O LETTIE C RICKS
14 OAK VILLAGE DR
ORMOND BEACH, FL 32174

New Mailing Address:

C/O IRENE KELLENBERGER
1295 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

FEI Number: 59-0683857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LETTIE, RICKS
14 OAK VILLAGE DR
ORMOND BEACH, FL 32174 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: PCD () Delete
Name: BOLTZ, HELEN
Address: 22 OLD MACON DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: VD () Delete
Name: FARMER, DOROTHY
Address: 4 OCEANS WEST BLVD #304D
City-St-Zip: DAYTONA BEACH, FL 32118

Title: SDP () Delete
Name: SIRK, MARJORIE
Address: 3054 S PENINSULA DR
City-St-Zip: DAYTONA BEACH, FL 32118

Title: TD () Delete
Name: RICKS, LETTIE
Address: 14 OAK VILLAGE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: CS () Delete
Name: FERBRACH, MARGARET
Address: 944 S PENINSULA DR 404
City-St-Zip: DAYTONA BEACH, FL 32118

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT () Change (X) Addition
Name: KELLENBERGER, IRENE M MS
Address: 1295 OCEAN SHORE BLVD
City-St-Zip: ORMOND BCH, FL 32176

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: LETTIE C RICKS

TD

05/11/2009

Electronic Signature of Signing Officer or Director

Date