2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# 724023

Entity Name: WEST PALM BEACH GARDEN CLUB, INC.

Current Principal Place of Business:

4800 DREHER TRAIL NORTH
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

4800 DREHER TRAIL NORTH BOX 6871
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STORMS, SUSAN K
217 12TH AVENUE NORTH
LAKE WORTH, FL 33460 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: 1VP ( ) Delete
Name: SCHMIDT, JEANNETTE
Address: 126 LAKE ANN
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: P ( ) Delete
Name: ARLUND, SANDRA
Address: 1206 S LAKE DRIVE # 303
City-St-Zip: LANTANA, FL 33462 US

Title: T ( ) Delete
Name: STORMS, SUSAN K
Address: 217 12TH AVENUE NORTH
City-St-Zip: LAKE WORTH, FL 33460 US

Title: RS ( ) Delete
Name: MYERS, MICHELE
Address: 152 SEABREEZE AVENUE
City-St-Zip: PALM BEACH, FL 33480 US

Title: AT (X) Delete
Name: DOWLING, EVELYN
Address: 1878 BELL LANE
City-St-Zip: WEST PALM BEACH, FL 33406 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SCHMIDT, JEANNETTE
Address: 126 LAKE ANN
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: VP (X) Change ( ) Addition
Name: WAIT, GLORIA
Address: 1524 39TH STREET
City-St-Zip: WEST PALM BEACH, FL 33407 US

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

Title: S (X) Change ( ) Addition
Name: COHN, CINDY
Address: 103 LAKE DORA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33411 US

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

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: SUSAN K. STORMS T 04/21/2009
Electronic Signature of Signing Officer or Director — Date