2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# 727937

Entity Name: ARLINGTON WOMAN'S CLUB HOLDING CORPORATION

Current Principal Place of Business:

5714 ARLINGTON RD
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

5714 ARLINGTON RD
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-0933692 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMBS, JANICE
2473 DEN STREET
ST. AUGUSTINE, FL 32092 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: VD ( ) Delete
Name: WALLACE, SALLY
Address: 5708 PERCH DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP ( ) Delete
Name: BAILEY, ELAINE
Address: 8129 FT. CAROLINE RD
City-St-Zip: JACKSONVILLE, FL 32277

Title: VD ( ) Delete
Name: COMBS, JANICE
Address: 2473 DEN STREET
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: T ( ) Delete
Name: ELKINS, ROBERTA
Address: 4251 MONUMENT RD H601
City-St-Zip: JACKSONVILLE, FL 32225

Title: S ( ) Delete
Name: MILLARD, SYLVIA
Address: 1433 BROOKMONT AVE E
City-St-Zip: JACKSONVILLE, FL 32211

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:

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: JANICE L. COMBS VD 04/28/2009

Electronic Signature of Signing Officer or Director — Date