

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729184

FILED
Mar 11, 2009
Secretary of State

Entity Name: LEGAL SERVICES OF THE CHARLOTTE COUNTY BAR ASSOCIATION, INC.

Current Principal Place of Business:

350 E. MARION AVENUE
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

14295 S TAMIAMI TRAIL
NORTH PORT, FL 34287 US

New Mailing Address:

FEI Number: 59-1925514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSELL, W. KEVIN
14295 S TAMIAMI TRAIL
NORTH PORT, FL 34287 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: PD () Delete
Name: RUSSEL, W. KEVIN
Address: 14295 S TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287

Title: VD () Delete
Name: ROSS, WARREN
Address: 223 TAYLOR STREET
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD () Delete
Name: LUCAS, JASON
Address: 17825 MURDOCK CIRCLE, SUITE B
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: WILSON, MICHAEL
Address: 17801 MURDOCK CIRCLE, UNIT A
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D () Delete
Name: SIMPSON, RICHARD
Address: 350 E. MARION AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUSSELL, W. KEVIN
Address: 14295 S TAMIAMI TRAIL
City-St-Zip: NORTH PORT, FL 34287

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

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Name:
Address:
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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: W. KEVIN RUSSELL

RA

03/11/2009

Electronic Signature of Signing Officer or Director

Date