

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736777

FILED
Apr 16, 2009
Secretary of State

Entity Name: DANA SHORES WOMAN'S CLUB, INC.

Current Principal Place of Business:

3932 E EDEN ROC CIR
TAMPA, FL 33634 US

New Principal Place of Business:

Current Mailing Address:

3932 E EDEN ROC CIR
TAMPA, FL 33634 US

New Mailing Address:

FEI Number: 59-3102100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHDICH, VEEANN D
3932 E EDEN ROCK CIRCLE
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

MAHDIEH, VEEANN D
3932 E EDEN ROCK CIRCLE
TAMPA, FL 33634 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: VEEANN MAHDIEH

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAHDIEH, VEEANN
Address: 3932 EDEN ROC CIR E
City-St-Zip: TAMPA, FL 33634

Title: TD () Delete
Name: MAWN, BETTINA
Address: 3915 VERSAILLES DR
City-St-Zip: TAMPA, FL 33634

Title: 1VD () Delete
Name: PETTERSON, MARIA
Address: 3939 DORAL DR
City-St-Zip: TAMPA, FL 33634

Title: 2VD () Delete
Name: MARKOWITZ, CARLA
Address: 3936 DORAL DR
City-St-Zip: TAMPA, FL 33634

Title: RS () Delete
Name: VIVINO, MISSY
Address: 3909 EDEN ROC CR. W.
City-St-Zip: TAMPA, FL 33634

Title: CS () Delete
Name: HORNER, NATALIE
Address: 3930 FONTAINEBLEAU DR.
City-St-Zip: TAMPA, FL 33634

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: RS (X) Change () Addition
Name: HAJAISTRON, KIM
Address: 3943 VERSAILLES DR
City-St-Zip: TAMPA, FL 33634

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: BETTINA MAWN

TD

04/16/2009

Electronic Signature of Signing Officer or Director

Date