2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737201

FILED Jun 06, 2008 Secretary of State

Entity Name: WEST ORANGE GIRLS CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 881 OCOEE APOPKA RD OCOEE, FL 34761 US **Current Mailing Address: New Mailing Address:** P O BOX 705 OCOEE, FL 34761 US FEI Number: 59-1800795 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: Name and Address of New Registered Agent: NUCKOLES, JEFF 1977 HEDGÉ ROW CIR OCOEE, FL 34761 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NUCKOLES, JEFF Name: Name: 1977 HEDGE GROW CIR Address: Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: Title: DV Title: (X) Change () Addition () Delete DAVIS, CHRIS Name: THOMAS, JEFF Name: Address: 1190 PURTLOW DR Address: 2012 ANCIENT OAK DR. City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: OCOEE, FL 34761 Title: DV () Delete Title: () Change () Addition PARR, STEVE Name: Name: 324 FULLERS CROSS RD Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: Title: DS Title: DS (X) Change () Addition () Delete THOMAS, JEFF Name: Name: CARROLL, SHAWN 2012 ANCIENT OAK DR 881 OCOEE APOPKA RD Address: Address: City-St-Zip: OCOEE, FL 34761 City-St-Zip: OCOEE, FL 34761 Title: () Delete Title: (X) Change () Addition KELLY, PAT DUNCAN, ERIN Name: Name: 2280 GREYWALL AVE. 881 OCOEE APOPKA RD Address: Address: OCOEE, FL 34761 OCOEE, FL 34761 City-St-Zip: 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: JEFF THOMAS DV 06/06/2008