

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745813

FILED
Apr 01, 2010
Secretary of State

Entity Name: PLANT CITY CIVITAN CLUB, INC.

Current Principal Place of Business:

1715 OAKWOOD ESTATES DR
PLANT CITY, FL 33563 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 351
PLANT CITY, FL 335640351 US

New Mailing Address:

FEI Number: 23-7032972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, THOMAS M
1715 OAKWOOD ESTATES DR
PLANT CITY, FL 33563 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: D
Name: PORTER, VERNON
Address: 4603 W BUGG RD
City-St-Zip: PLANT CITY, FL 33567

Title: S
Name: CHRISTIE, ROBERT
Address: 816 N DRANE ST
City-St-Zip: PLANT CITY, FL 33566

Title: PE
Name: SHIFLETT, ANN W
Address: 306 EUNICE DR.
City-St-Zip: PLANT CITY, FL 33563

Title: T
Name: GRIFFIN, THOMAS M
Address: 1715 OAKWOOD ESTATES DR
City-St-Zip: PLANT CITY, FL 33563

Title: P
Name: PUGNE, PAT
Address: PO BOX 927
City-St-Zip: PLANT CITY, FL 335640927

Title: D
Name: NELSON, GARY
Address: 402 W BALL ST
City-St-Zip: PLANT CITY, FL 33563

I hereby 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 all other like empowered.

SIGNATURE: THOMAS M GRIFIFN

T

04/01/2010

Electronic Signature of Signing Officer or Director

Date