2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# 748352

Entity Name: MONTICELLO WOMAN'S CLUB

Current Principal Place of Business:

975 E PEARL STREET
MONTICELLO, FL 32344 US

New Principal Place of Business:

875 E PEARL STREET
MONTICELLO, FL 32344 US

Current Mailing Address:

P.O. BOX 176
MONTICELLO, FL 32345 US

New Mailing Address:

FEI Number: 59-2031428 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIRD, T. BUCKINGHAM
220 S. CHERRY ST.
MONTICELLO, FL 32344 US

Name and Address of New Registered Agent:

BIRD, T. BUCKINGHAM
165 E DOGWOOD ST
MONTICELLO, FL 32344 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: _____ 01/22/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: BARD, ELIZABETH
Address: 79 HILLSIDE RD.
City-St-Zip: MONTICELLO, FL 32344

Title: PD ( ) Delete
Name: WADSWORTH, JAN
Address: 70 W. HUMMINGBIRD LN.
City-St-Zip: MONTICELLO, FL 32344

Title: VD ( ) Delete
Name: STRICKLAND, ETHEL
Address: 37 W. HUMMINGBIRD LN.
City-St-Zip: MONTICELLO, FL 32344

Title: VD ( ) Delete
Name: LANE, TONI
Address: 353 NACOSSA RD.
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change ( ) Addition
Name: KELLY, PAM
Address: 215 N JEFFERSON ST
City-St-Zip: MONTICELLO, FL 32344

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: ELIZABETH Z BARD TD 01/22/2009
Electronic Signature of Signing Officer or Director — Date