

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748957

FILED
Apr 04, 2009
Secretary of State

Entity Name: ZONTA CLUB OF BARTOW, INC.

Current Principal Place of Business:

1840 S MARGARET
BARTOW, FL 33830 US

New Principal Place of Business:

Current Mailing Address:

1840 S MARGARET
BARTOW, FL 33830 US

New Mailing Address:

FEI Number: 59-2378248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELLERS, HAZEL
1990 DE LA PALMA
BARTOW, FL 33830 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: CARRIER, NANCY
Address: 1520 S. KISSINGEN AVE
City-St-Zip: BARTOW, FL 33830 US

Title: D () Delete
Name: FRISBIE, MARY G
Address: 1840 S MARGARET AVE
City-St-Zip: BARTOW, FL 33830

Title: D () Delete
Name: WRIGHT, PATRICIA R
Address: 1105 S WOODLAWN AVENUE
City-St-Zip: BARTOW, FL 33830

Title: SD () Delete
Name: HOOPER, JOSIE
Address: 132 SANDBURG LANE SE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VD () Delete
Name: HANCOCK, JENNY
Address: 470 E HOOKER ST
City-St-Zip: BARTOW, FL 33830

Title: TD () Delete
Name: MOONEYHAM, LENORE
Address: 2055 S FLORAL AVE
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: WRIGHT, PATRICIA R
Address: 1105 S WOODLAWN AVENUE
City-St-Zip: BARTOW, FL 33830

Title: SD (X) Change () Addition
Name: MEADOWS, JANE
Address: 310 S ORANGE AVE
City-St-Zip: BARTOW, FL 33830

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

Title: D (X) Change () Addition
Name: TILL, WILMA
Address: 1090 S BROADWAY
City-St-Zip: BARTOW, FL 33830

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: PATRICIA R WRIGHT

T

04/04/2009

Electronic Signature of Signing Officer or Director

Date