2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#750676

FILED Oct 28, 2009 Secretary of State

Entity Name: SENIOR CITIZENS CLUB OF HERNANDO COUNTY, FLORIDA INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
	NBUOY RD ILL, FL 346061952 US	
Current M	ailing Address:	New Mailing Address:
	NBUOY RD ILL, FL 346061952 US	
	: 59-2014004 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the corporation did no	FEI Number Not Applicable () Certificate of Status Desired (X) t receive the prior notice.
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
7925 RHAI	DES, BELMEDA NBUOY RD IILL, FL 34606 US	NEIL, THERESA W 7925 RHANBUOY RD SPRING HILL, FL 34606 US
	named entity submits this statement for the pe of Florida.	urpose of changing its registered office or registered agent, or both,
SIGNATUF	RE: THERESA W NEIL	10/28/2009
	Electronic Signature of Registered Age	nt Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	S () Delete GODFREY, HELEN 5254 BEACHVIEW DR. SPRING HILL, FL 34606	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete O'SHEA, JOANNE 5484 ALDERWOOD SPRING HILL, FL 34606	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete FERNANDES, BELMEDA 16624 CARACARA CT. SPRING HILL, FL 34610	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete BUONO, JOHN 6028 PINEHURST DR. SPRING HILL, FL 34606	Title: P (X) Change () Addition Name: NEIL, THERESA W Address: 15148 WOODBURY RD City-St-Zip: SPRING HILL, FL 34604
Title: Name: Address: City-St-Zip:	D () Delete ORMSTON, JOAN 2051 ALAMEDA DR SPRING HILL, FL 34609	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D (X) Delete LAWLESS, EDITH 4491 HOFFMAN AVE SPRING HILL, FL 34606	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: THERESA W NEIL P 10/28/2009