## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#752810** 

FILED Apr 14, 2009 Secretary of State

Entity Name: CHARLOTTE COUNTY COUNCIL ON AGING, INC.

Current Principal Place of Business: New Principal Place of Business:

3456 DEPEW AVENUE

PORT CHARLOTTE, FL 33952 US

Current Mailing Address: New Mailing Address:

3456 DEPEW AVENUE

PORT CHARLOTTE, FL 33952 US

FEI Number: 59-2029676 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCAS, CAROL A

726 ELLIOTT CIRCLE., C.

726 ELLICOTT CIRCLE., SO

PORT CHARLOTTE EL 22052 LIS

PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33952 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: CAROL ANN LUCAS 04/14/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TV ( ) Delete Title: TP (X) Change ( ) Addition

 Name:
 DETTOR, DETTOR
 Name:
 LUCAS, CAROL ANN

 Address:
 2500 AARON ST.
 Address:
 726 ELLICOTT CIRCLE SOUTH

City-St-Zip: PORT CHARLOTTE, FL 33952 US City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: TT () Delete Title: TV (X) Change () Addition Name: RUGGIERI, ANTOINETTE Name: DETTOR, KAREN

Address: 304 WATERSIDE ST. Address: 23023 WEST CHESTER BLVD

City-St-Zip: PORT CHARLOTTE, FL 33954 City-St-Zip: PORT CHARLOTTE, FL 33980 US

Title: TP ( ) Delete Title: TT (X) Change ( ) Addition Name: LUCAS, CAROL A Name: ROMILLO, ANA Address: 726 ELLIOTT CIRCLE, S. Address: 2120 LUCKY ST

City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33948 US

Title: TS () Delete Title: TS (X) Change () Addition
Name: CASE. PAT Name: CASE. PAT

Name: CASE, PAT Name: CASE, PAT
Address: 4075 TAMIAMI TRAIL Address: 4075 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: ( ) Delete Title: ED ( ) Change (X) Addition

Name: Name: LADD, RUTHÀNN
Address: Address: 3456 DEPEW AVE

City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33952 US

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: CAROL ANN LUCAS TP 04/14/2009