## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#753680** 

FILED Feb 26, 2009 Secretary of State

Entity Name: THE COCONUT GROVE CIVIC CLUB, INC.

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

P.O. BOX 381 2535 INAGUA AVENUE

COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 US

Current Mailing Address: New Mailing Address:

P.O. BOX 381 P.O. BOX 330381

COCONUT GROVE, FL 331330381 US COCONUT GROVE, FL 332330381 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

NELSON, JOYCE
2535 INAGUA AVENUE
NELSON, JOYCE
2535 INAGUA AVENUE
2535 INAGUA AVENUE

MIAMI, FL 33133 US COCONUT GROVE, FL 33133 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: 02/26/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT ( ) Delete Title: DT (X) Change ( ) Addition Name: STAHL, TED STAHL, TED

Address: 2867 DAY AVENUE Address: 2867 DAY AVENUE

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133 US

Name: CHANDLER, JONI Name: CHANDLER, JONI Address: 3635 AVOCADO LN Address: 3635 AVOCADO LN

City-St-Zip: MIAMI, FL 33133 City-St-Zip: COCONUT GROVE, FL 33133 US

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

 Name:
 TERRY, KITTY
 Name:
 TERRY, KITTY

 Address:
 1896 TIGERTAIL
 Address:
 1896 TIGERTAIL

City-St-Zip: COCONUT GROVE, FL City-St-Zip: COCONUT GROVE, FL 33133 US

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

Name: NELSON, JOYCE Name: NELSON, JOYCE

Address: 2535 INAGUA AVE Address: 2535 INAGUA AVE

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:
 COCONUT GROVE, FL 33133 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: TED STAHL DT 02/26/2009