2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758232

FILED Feb 26, 2009 Secretary of State

Entity Name: W.T. NEAL CIVIC CENTER, INC.

Current Pri	incipal Place of Business:	New Principal Place of Business:
17773 N PE BLOUNTST	EAR ST OWN, FL 32424 US	
Current Mailing Address:		New Mailing Address:
17773 N PE BLOUNTST	EAR ST FOWN, FL 32424 US	
FEI Number:	59-2140323 FEI Number Applied For () FEI Nu	mber Not Applicable () Certificate of Status Desired (X)
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
MONTGOMERY, HOWELL 24261 NE DR NW ELDRIDGE RD BLOUNTSTOWN, FL 32424 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:		
	Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () Delete MCCELLAN, HENTZ H. 17518 NE TERSA TERR BLOUNTSTOWN, FL 32424	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DP () Delete MONTGOMERY, HOWELL 24261 NE DRIVE NW ELDRIDGE RD BLOUNTSTOWN, FL 32424	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DV () Delete JOHNSON, JEANETTE 17799 NE CHARLIE JOHNS ST BLOUNTSTOWN, FL 32424	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete DURHAM, JOE RAY 18946 SR 71 N BOX 54 BLOUNTSTOWN, FL 32424	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	STD () Delete CORBIN, FINLAY, 19999 SW DOGWOOD AVE BLOUNTSTOWN, FL	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: HOWELL MONTGOMERY DP 02/26/2009