

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761973

FILED
Apr 09, 2009
Secretary of State

Entity Name: RICHMOND HEIGHTS WOMAN'S CLUB, INC.

Current Principal Place of Business:

14855 S.W. 116 AVE.
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

14855 SW 116TH AVE
MIAMI, FL 33176 US

New Mailing Address:

14855 S.W. 116 AVE.
MIAMI, FL 33176

FEI Number: 59-6162250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, GLORIA R
10700 SW 148TH ST
MIAMI, FL 33176 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: JOHNSON, GLORIA R
Address: 10700 SW 148TH ST
City-St-Zip: MIAMI, FL 33176

Title: VD () Delete
Name: JACKSON, BERNICE
Address: 14701 SW 107 AVENUE
City-St-Zip: MIAMI, FL 33156

Title: SD () Delete
Name: CRAWFORD, MARILYN S
Address: 14332 SW 110TH AVE
City-St-Zip: MIAMI, FL 33176

Title: VD () Delete
Name: FAISON, DARNELL
Address: 14855 S.W. 116 AVE.
City-St-Zip: MIAMI, FL 33176

Title: SD () Delete
Name: MOSLEY, RENE
Address: 14855 S.W. 116 AVE.
City-St-Zip: MIAMI, FL 33176

Title: TD () Delete
Name: MITCHELL, IRENE
Address: 11731 SW 180TH ST.
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MARILYN CRAWFORD

SD

04/09/2009

Electronic Signature of Signing Officer or Director

Date