

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762009

FILED
Feb 26, 2009
Secretary of State

Entity Name: WOMAN'S CLUB OF ST. CLOUD, FLORIDA, INC.

Current Principal Place of Business:

1014 MASSACHUSETTS AVE.
P O BOX 700057
ST CLOUD, FL 347707057

New Principal Place of Business:

1014 MASSACHUSETTS AVE.
ST CLOUD, FL 347707057

Current Mailing Address:

1014 MASSACHUSETTS AVE.
P O BOX 700057
ST CLOUD, FL 347707057

New Mailing Address:

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

Name and Address of Current Registered Agent:

FRANK, MARY E
1793 CHRISTINA LEE LN
SAINT CLOUD, FL 34769 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: BUCKNER, JUNE
Address: 3505 BAY COURT
City-St-Zip: SAINT CLOUD, FL 34769

Title: T () Delete
Name: WITHERINGTON, JEAN
Address: 2595 N NARCOOSSEE RD
City-St-Zip: SAINT CLOUD, FL 34771

Title: VPD () Delete
Name: HUDELSON, IRENE
Address: 5595 IRLO BRONSON LOT #60
City-St-Zip: SAINT CLOUD, FL 34771

Title: S () Delete
Name: MCKEOWN, BETTY
Address: 1616 GAR STREET
City-St-Zip: SAINT CLOUD, FL 34771

Title: PD (X) Delete
Name: HUDELSON, IRENE
Address: 5595 IRLO BRONSON LOT #60
City-St-Zip: SAINT CLOUD, FL 34771

Title: VPD (X) Delete
Name: BAUST, CHARMAINE
Address: 2316 SWEETWATER BLVD
City-St-Zip: SAINT CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HUDELSON, IRENE
Address: 5595 IRLO BRONSON LOT #60
City-St-Zip: SAINT CLOUD, FL 34771

Title: T (X) Change () Addition
Name: FRANK, MARY ELLEN
Address: 1793 CHRISTINA LEE LN
City-St-Zip: SAINT CLOUD, FL 34769

Title: VPD (X) Change () Addition
Name: BAUST, CHARMAINE
Address: 2316 SWEETWATER BLVD
City-St-Zip: SAINT CLOUD, FL

Title: S (X) Change () Addition
Name: FERRARI, TERRI
Address: 1021 MONROE AVE
City-St-Zip: SAINT CLOUD, FL 34769

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: MARY ELLEN FRANK

T

02/26/2009

Electronic Signature of Signing Officer or Director

Date