

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762598

FILED  
Mar 09, 2009  
Secretary of State

**Entity Name:** LAKELAND EVENING SERTOMA CLUB, INC.

**Current Principal Place of Business:**

% RALPH SARGEANT  
232 N. MASSACHUSETTS AVENUE  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

% RALPH SARGEANT  
232 N. MASSACHUSETTS AVENUE  
LAKELAND, FL 33801

**New Mailing Address:**

**FEI Number:** 59-2252271

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHEELER, BILL  
1203 HEIDI LANE N  
LAKELAND, FL 33813 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: D ( ) Delete  
Name: SPOONER, GREG  
Address: 1114 SHADOWWOOD CT  
City-St-Zip: LAKELAND, FL 33813

Title: T ( ) Delete  
Name: DUVALL, JAMES  
Address: 5516 CLUB HILL W.  
City-St-Zip: LAKELAND, FL

Title: P ( ) Delete  
Name: JOHNSON, CARL E  
Address: 3453 ASHLING DR  
City-St-Zip: LAKELAND, FL 33803

Title: D ( ) Delete  
Name: EBY, DAVID  
Address: 4825 FOXRUN  
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete  
Name: ORME, JEFF  
Address: 1811 MEADOW BROOK AVE  
City-St-Zip: LAKELAND, FL 33803

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: DUVALL, JAMES  
Address: 5516 CLUB HILL W.  
City-St-Zip: LAKELAND, FL 33812

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: JAMES M. DUVALL

TREA

03/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date