

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764794

FILED
Feb 27, 2009
Secretary of State

Entity Name: THE CIVITAN CLUB OF ST. PETERSBURG, INC.

Current Principal Place of Business:

CIVITAN BEACH CLUB GULF BLVD
ST. PETERSBURG, FL 337330094

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10094
ST. PETERSBURG, FL 337330094

New Mailing Address:

FEI Number: 59-6134180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESBAILLETS, ANETTE
1610 CENTRAL AVENUE
SAINT PETERSBURG, FL 33712 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: P () Delete
Name: KEATING, RICHARD MR.
Address: 2830 ALTON DRIVE
City-St-Zip: ST PETE BEACH, FL 33706 US

Title: S () Delete
Name: SCHROEDER, ROBERT MR.
Address: 2614 53RD STREET SOUTH
City-St-Zip: GULFPORT, FL 33707 US

Title: T () Delete
Name: DESBAILLETS, ANETTE
Address: 1610 CENTRAL AVENUE
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D () Delete
Name: HALBERT, BURT
Address: 2048 ILLINOIS AVENUE NE
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D () Delete
Name: BRODERICK, THOMAS
Address: 3925 QUEEN STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33714

Title: D () Delete
Name: WELLS, HERMAN A MR
Address: 628 64TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710

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
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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: ANETTE DESBAILLETS

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02/27/2009

Electronic Signature of Signing Officer or Director

Date