2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jun 18, 2<u>00</u>9 **DOCUMENT#764929** Secretary of State

Entity Name: SPACE COAST WRITERS GUILD, INC.

Current Principal Place of Business: New Principal Place of Business:

1677 HUDSON CIRCLE SOUTH 1310 MEADOWBROOK RD NE MELBOURNE, FL 32935 PALM BAY, FL 32905

Current Mailing Address: New Mailing Address:

PO BOX 262

MELBOURNE, FL 329020262

FEI Number: 59-2369516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HENDERSON, JOYCE 1310 MEADOWBROOK ROAD NE PALM BAY, FL 32905

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

HENDERSON, JOYCE Name: Name: 1310 MEADOWBROOK ROAD NE Address: Address:

City-St-Zip: PALM BAY, FL 32905 US City-St-Zip:

Title: TD () Delete Title: (X) Change () Addition Name: MAGER, PENNIE Name: HUCKS, JOSEPH

Address: 3372 LOIS LANE Address: 7000 ORCHID TREE DRIVE

City-St-Zip: MELBOURNE, FL 32904 City-St-Zip: GRANT, FL 32949

Title: () Delete Title: () Change () Addition

DAVIS, GENE Name: Name: Address: 851 PEREGRINE DRIVE Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

Name: NAEGEL, LESLIE D Name: Address: 162 MONACO ROAD Address: City-St-Zip: WEST MELBOURNE, FL 32904 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: JOYCE HENDERSON PD 06/18/2009