

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766831

FILED
Jan 07, 2009
Secretary of State

Entity Name: INVERNESS SERTOMA CLUB, INC.

Current Principal Place of Business:

310 N. CITRUS AVENUE
INVERNESS, FL 34450 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1415
INVERNESS, FL 34450 US

New Mailing Address:

FEI Number: 59-2269531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DI GUGLIELMO, SAMUEL J
310 N. CITRUS AVENUE
INVERNESS, FL 34450 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: PRES () Delete
Name: AVERY, MARK PRES
Address: 9220 EAST POINT -O-WOODS
City-St-Zip: INVERNESS, FL 34450

Title: T () Delete
Name: FOWLER, WILLIAM TREAS
Address: 97 NORTH HOLLYWOOD CIRCLE
City-St-Zip: CRYSTAL RIVER, FL 34446

Title: D () Delete
Name: JAKOB, RAINOR DIR
Address: 4200E. FLYING EAGLE CT.
City-St-Zip: INVERNESS, FL 34453

Title: S () Delete
Name: HOWARD, CHRIS SEC
Address: 1517 E. SEATTLE SLEW CIRCLE
City-St-Zip: INVERNESS, FL 34453

Title: CHB () Delete
Name: BARDSLEY, WAYNE A CHB
Address: 1131 NE 5TH AVE.
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D () Delete
Name: ROGERS, KEN DIR
Address: 319 SOUTH MONROE STREET
City-St-Zip: BEVERLY HILLS, FL 34465

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FOWLER, WILLIAM PRES
Address: 970 NORTH HOLLYWOOD CIRCLE
City-St-Zip: CHRISTAL RIVER, FL 34446 FL

Title: T (X) Change () Addition
Name: SHELTON, LESA TREAS
Address: 8970 EDEN WALK COURT
City-St-Zip: INVERNESS, FL 34450

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

Title: S (X) Change () Addition
Name: ROGERS, CHAD SEC
Address: 7200 W. VILLAGE DRIVE
City-St-Zip: HOMOSASSA, FL 34446

Title: CHB (X) Change () Addition
Name: AVERY, MARK CHB
Address: 9220 EAST POINT O WOODS DRIVE
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: BENDTSEN, GEORGE DIR
Address: 1624 EAST PACIFIC LANE
City-St-Zip: INVERNESS, FL 34450

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: WILIAM FOWLER

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date