

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768835

FILED  
Mar 12, 2008  
Secretary of State

**Entity Name:** POINSETTIA PARK SOCIAL CLUB, INC.

**Current Principal Place of Business:**

4701 BALLARD RD.  
FORT MYERS, FL 33905

**New Principal Place of Business:**

**Current Mailing Address:**

4701 BALLARD RD.  
FORT MYERS, FL 33905 US

**New Mailing Address:**

**FEI Number:** 59-2432737

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, MARTHA  
275 POINSETTIA  
FORT MYERS, FL 33905 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: SMITH, MARTHA  
Address: 275 POINSETTIA DR  
City-St-Zip: FORT MYERS, FL 33905

Title: S ( ) Delete  
Name: MECK, JACQUIE  
Address: 74 SIESTA LN  
City-St-Zip: FORT MYERS, FL 33905

Title: T ( ) Delete  
Name: GOFFNEDI, ESTHER  
Address: 2 POINSETTIA DR  
City-St-Zip: FORT MYERS, FL 33905

Title: PP ( ) Delete  
Name: LOVENINE, DALE  
Address: 64 HACIENDA BLVD.  
City-St-Zip: FORT MYERS, FL 33905

Title: VPD (X) Delete  
Name: GIBBONS, STEVE  
Address: 134 GRANADA ST  
City-St-Zip: FORT MYERS, FL 33905

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

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

Title: S (X) Change ( ) Addition  
Name: DIXON, PEGGY  
Address: 20 POINSETTIA  
City-St-Zip: FORT MYERS, FL 33905

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

Title: VP (X) Change ( ) Addition  
Name: GIBBONS, STEVE  
Address: 134 GRANADA ST  
City-St-Zip: FORT MYERS, FL 33905

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: MARTHA SMITH

P

03/12/2008

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

\_\_\_\_\_  
Date