

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001185

FILED  
Jan 28, 2009  
Secretary of State

Entity Name: ADDISON RESERVE WOMEN'S CLUB, INC.

## Current Principal Place of Business:

7769 TRIESTE PLACE  
DELRAY BEACH, FL 33446

## New Principal Place of Business:

7355 SEDONA WAY  
DELRAY BEACH, FL 33446

## Current Mailing Address:

7769 TRIESTE PLACE  
DELRAY BEACH, FL 33446

## New Mailing Address:

7355 SEDONA WAY  
DELRAY BEACH, FL 33446

FEI Number: 65-0979957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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: PD ( ) Delete  
Name: SHAPIRO, NAOMI  
Address: 7324 SARIMENTO PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: VD ( ) Delete  
Name: GOLDMAN, BRENDA  
Address: 7864 TRIESTE PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: SD ( ) Delete  
Name: SHIRLEY, STEIN  
Address: 7355 SEDONA WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: TD ( ) Delete  
Name: SCWEIBISH, SHARON  
Address: 7769 TRIESTE PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SCHWEIBISH, SHARON  
Address: 7769 TRIESTE PLACE  
City-St-Zip: DELRAY BEACH, FL 33446

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

Title: SD (X) Change ( ) Addition  
Name: BARANICK, ANNETTE  
Address: 7862 VILLA D'ESTE WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: TD (X) Change ( ) Addition  
Name: STEIN, SHIRLEY  
Address: 7355 SEDONA WAY  
City-St-Zip: DELRAY BEACH, FL 33446

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: SHIRLEY STEIN

TD

01/28/2009

Electronic Signature of Signing Officer or Director

Date