

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002986

Entity Name: ONYX BOOK CLUB, INC.

FILED  
Apr 11, 2009  
Secretary of State

## Current Principal Place of Business:

20353 NW 47TH AVE  
MIAMI, FL 33055

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 2225  
MIAMI, FL 33055

## New Mailing Address:

FEI Number: 65-1028289

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHEW, JACQUELYN E  
20353 N.W. 47TH AVENUE  
MIAMI, FL 33055 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: CHEW, JACQUELYN E  
Address: 20353 N.W. 47TH AVENUE  
City-St-Zip: MIAMI, FL 33055

Title: SD ( ) Delete  
Name: WYNN, JUANITA  
Address: 3425 SW 64TH AVE  
City-St-Zip: MIRAMAR, FL 33023

Title: TD ( ) Delete  
Name: HAMILTON, CAROLYN  
Address: 3421 PERCIVAL AVE.  
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD ( ) Delete  
Name: ANDERSON, MAE  
Address: 3315 N.W. 81 TERR.  
City-St-Zip: MIAMI, FL 33147

## 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  
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: JACQUELYN E. CHEW

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

Date