

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007113

FILED
Jan 16, 2009
Secretary of State

Entity Name: CLERMONT CHAPTER FLORIDA, INC.

Current Principal Place of Business:

2480 S. HWY 27
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

2480 S HWY 27
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 45-0480291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOGLE, NAN B
2691 BOND STREET
CLERMONT, FL 34711 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: THORN, THOMAS
Address: 2480 S. HWY 27
City-St-Zip: CLERMONT, FL 34711

Title: VD () Delete
Name: CROUSE, LINDA R
Address: 2480 S. HWY 27
City-St-Zip: CLERMONT, FL 34711

Title: SD () Delete
Name: FOGLE, NAN B
Address: 2691 BOND STREET
City-St-Zip: CLERMONT, FL 34711

Title: TD () Delete
Name: CAGE, DAWN
Address: 2480 S. HWY 27
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: MALIK, JANICE
Address: 2480 S. HWY 27
City-St-Zip: CLERMONT, FL 34711

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: TD (X) Change () Addition
Name: HALLORAN, DENNIS
Address: 8751 BRADLEY CIRCLE
City-St-Zip: CLERMONT, FL 34711

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: NAN B. FOGLE

SD

01/16/2009

Electronic Signature of Signing Officer or Director

Date