

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004486

FILED  
Mar 22, 2009  
Secretary of State

Entity Name: MILLENNIUM SERTOMA CLUB, INC.

## Current Principal Place of Business:

1414 LORETTO CIR  
ODESSA, FL 33556

## New Principal Place of Business:

## Current Mailing Address:

1414 LORETTO CIR  
ODESSA, FL 33556

## New Mailing Address:

15813 KNOLLVIEW DR  
TAMPA, FL 33624

FEI Number: 20-0098765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KENNEDY, JOSEPH  
1414 LORETTO CIR  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

MUTCHLER, DENNIS  
15813 KNOLLVIEW DR  
TAMPA, FL 33624 US

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: DENNIS MUTCHLER

03/22/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KENNEDY, JOSEPH  
Address: 1414 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: MUTCHLER, DENNIS  
Address: 1414 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: HAND, JEANNE  
Address: 1414 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: DIXON, TED  
Address: 1414 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: D ( ) Delete  
Name: O'DONNELL, JOYCE  
Address: 1414 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556

## 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:

Title: D (X) Change ( ) Addition  
Name: DICKY, REG  
Address: 1414 LORETTO CIRCLE  
City-St-Zip: ODESSA, FL 33556

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: DENNIS MUTCHLER

D

03/22/2009

Electronic Signature of Signing Officer or Director

Date