

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007571

FILED
Mar 21, 2009
Secretary of State

Entity Name: PINES WEST CAMERA CLUB, INC

Current Principal Place of Business:

MIAMI HERLD OFFICE BUILDING
2010 NW 150TH
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

521 N 70TH WAY
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 20-2466858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDERICH, JUDITH
13901 SW 22 PL
DAVIE, FL 33325 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: BOJER, TED
Address: 5110 CLEVELAND ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: ROWE, ELAINE
Address: 19905 SW 5TH COURT
City-St-Zip: PEMBROKE PINES, FL 33029

Title: SEC () Delete
Name: MOURRA, CARLINE
Address: 19407 NW 13TH STREET
City-St-Zip: PWMBROKE PINES, FL 33029

Title: T () Delete
Name: WALTER, ANN
Address: 17766 SW 23 ST
City-St-Zip: MIRAMAR, FL 33029

Title: VP () Delete
Name: DOMINGUEZ, JOSE
Address: 13000 SW 15 CT.
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: FREDERICH, JUDITH
Address: 13901 SW 22 PL
City-St-Zip: DAVIE, FL 33325

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

Title: VP (X) Change () Addition
Name: DELLAPENNA, BOB
Address: 13255 SW 7 CT D401
City-St-Zip: PEMBROKE PINES, FL 33027

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: TED BOJER

PRES

03/21/2009

Electronic Signature of Signing Officer or Director

Date