2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001765

FILED Feb 17, 2009 Secretary of State

Entity Name: SOUTHWEST FLORIDA PASTEL SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 110236 222 WILDWOOD LANE NAPLES, FL 34108 NAPLES, FL 34105

Current Mailing Address: New Mailing Address:

P.O. BOX 110236 222 WILDWOOD LANE NAPLES, FL 34108 NAPLES, FL 34105

FEI Number: 22-3885890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VALENCOURT, MICHELE WILCOX, LYNNE 128 FIRT AVENUE

210 MAUDE ST. 128 FIRT AVENUE SOUTH PUNTA GORDA, FL 33950 US NAPLES, FL 34102 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: LEONARD GIBSON 02/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP () Delete Title: VP (X) Change () Addition Name: WEGMAN, TERRI Name: CRAVEN, GINGER

 Address:
 13323 POND APPLE DR., E.
 Address:
 6563 RIDGEWOOD DR.

 City-St-Zip:
 NAPLES, FL 34119
 City-St-Zip:
 NAPLES, FL 34108

Title: DV () Delete Title: T (X) Change () Addition Name: COBB, CAROLE Name: GIBSON, LEONARD

Address: 1240 NEAPOLITAN RD. Address: 222 WILDWOOD LANE City-St-Zip: PUNTA GORDA, FL 33983 City-St-Zip: NAPLES, FL 34105

 $\label{eq:title:pvc} \mbox{Title:} \qquad \mbox{DVC} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{VP} \qquad \mbox{(X) Change () Addition}$

Name: COCHRAN, BAXTER Name: BROWN, TOM

 Address:
 5876 KEY LIME WAY
 Address:
 4981 KENSINGTON HIGH ST

 City-St-Zip:
 FT. MYERS, FL 33919
 City-St-Zip:
 NAPLES, FL 34105

Title: P () Delete Title: () Change () Addition

Name: LAGRO, RALPH Name:
Address: 13038 SW KINGSWAY CIRCLE Address:

City-St-Zip: FORT OGDEN, FL 34267 City-St-Zip:

Title: DC () Delete Title: VP (X) Change () Addition

 Name:
 MOORE, JACKIE
 Name:
 HICKS, MARY LOU

 Address:
 10450 JEF-NIK LANE
 Address:
 16410 MILLSTONE CIRCLE

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 FT. MYERS, FL 33908

Title: DS () Delete Title: S (X) Change () Addition Name: FJELSTUL, ALICE Name: MCNAMARA, JEAN

Address: 9596 CYPRESS HAMMOCK CIR., STE. 201 Address: 8438 ABBINGTON CIRCLE 611

City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: NAPLES, FL 34108

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: LEONARD GIBSON TREA 02/17/2009

Electronic Signature of Signing Officer or Director

Date