2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# N05000006369

Entity Name: MACGEOGHEGAN FAMILY SOCIETY INCORPORATED

Current Principal Place of Business:

2646 EMERALD WAY
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

2646 EMERALD WAY
DEERFIELD BEACH, FL 33442

New Mailing Address:

FEI Number: 20-3230379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GEOGHEGAN, JAMES
2646 EMERALD WAY
DEERFIELD BEACH, FL 33442 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:	O	( ) Delete
Name:	GEOGHEGAN, JAMES	
Address:	2646 EMERALD WAY	
City-St-Zip:	DEERFIELD BEACH, FL 33442	
Title:	T	( ) Delete
Name:	MCDONALD, CAROLANNE	
Address:	801 NW 70 WAY	
City-St-Zip:	MARGATE, FL 33063	
Title:	O	( ) Delete
Name:	BIRKBECK, JOSEPHINE	
Address:	330 DERHAM RD.	
City-St-Zip:	NORWICH, NORFOLK, ENGLAND,	
Title:	O	( ) Delete
Name:	WILLETT, BETT	
Address:	48 NE 19TH TERRACE	
City-St-Zip:	DEERFIELD BEACH, FL 33441	
Title:	O	( ) Delete
Name:	GEOGHEGAN CUAN, EDDIE	
Address:	FEAMURE, KILTOON	
City-St-Zip:	ATHLONE, IRELAND,	
Title:	O	( ) Delete
Name:	GEOGHEGAN, SIDNEY	
Address:	34 WESTBOURNE RD.	
City-St-Zip:	BIRKDALE, SOUTHPORT, ENGLAND,	

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:	( ) 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: JAMES C. GEOGHEGAN MR. 01/09/2009

Electronic Signature of Signing Officer or Director — Date