

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009769

FILED
Jan 20, 2009
Secretary of State

Entity Name: WEST BOYNTON LADY BANDITS, INC.

Current Principal Place of Business:

6300 WINDCHIME PLACE
BOYNTON BEACH, FL 33437

New Principal Place of Business:

6340 COUNTRY FAIR CIRCLE
NA
BOYNTON BEACH, FL 33437 US

Current Mailing Address:

6300 WINDCHIME PLACE
BOYNTON BEACH, FL 33437

New Mailing Address:

6340 COUNTRY FAIR CIRCLE
NA
BOYNTON BEACH, FL 33437 US

FEI Number: 20-3512029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEWALT, RICHARD S
6300 WINDCHIME PLACE
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

CATAPANO, NEIL
6340 COUNTRY FAIR CIRCLE
BOYNTON BEACH, FL 33437 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: NEIL CATAPANO

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DEWALT, RICHARD S
Address: 6300 WINDCHIME PLACE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: DVP () Delete
Name: DEAN, JOE
Address: 6300 WINDCHIME PLACE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: DT (X) Delete
Name: CATAPANO, NEIL
Address: 6300 WINDCHIME PLACE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: DS (X) Delete
Name: WRIGHT, JOHN
Address: 6300 WINDCHIME PLACE
City-St-Zip: BOYNTON BEACH, FL 33437 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: CATAPANO, NEIL
Address: 6340 COUNTRY FAIR CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: VP (X) Change () Addition
Name: SCHARF, DAVID
Address: 6391 C. DURHAM DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

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: NEIL CATAPANO

PR

01/20/2009

Electronic Signature of Signing Officer or Director

Date