

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010080

FILED  
Feb 11, 2009  
Secretary of State

Entity Name: WOMAN'S CLUB OF DUNNELLON, INC.

**Current Principal Place of Business:**

11756 CEDAR STREET  
DUNNELLON, FL 34431

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1632  
DUNNELLON, FL 344301632

**New Mailing Address:**

FEI Number: 65-1295321

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MACK, LELSEY L  
10159 SW 192ND CIR  
DUNNELLON, FL 34432 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: 2VP ( ) Delete  
Name: KUSIAK, CARMEN  
Address: 5300 SW 176TH AVE  
City-St-Zip: DUNNELLON, FL 34432

Title: T ( ) Delete  
Name: KUNZ, ROSEMARY  
Address: 19175 SW 92ND LOOP  
City-St-Zip: DUNNELLON, FL 34432

Title: D ( ) Delete  
Name: BARNES, LINDA  
Address: 9454 W CARAVAN PATH  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: S ( ) Delete  
Name: SCHEMERO, JOANNE  
Address: 9849 SW 191ST AVE  
City-St-Zip: DUNNELLON, FL 34432

Title: D ( ) Delete  
Name: HESS, GERRY  
Address: 8992 SW 192 CT RD  
City-St-Zip: DUNNELLON, FL 34432

Title: V ( ) Delete  
Name: MACK, LESLEY  
Address: 10159 SW 19\*2ND CIRCLE  
City-St-Zip: DUNNELLON, FL 34432

**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: P (X) Change ( ) Addition  
Name: MACK, LESLEY  
Address: 10159 SW 19\*2ND CIRCLE  
City-St-Zip: DUNNELLON, FL 34432

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: LESLEY MACK

P

02/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date