## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000012503

FILED Apr 02, 2009 Secretary of State

Entity Name: BOYNTON BEACH GARDEN CLUB, INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 81 CEDAR CIR BOYNTON BEACH, FL 334369101 **Current Mailing Address: New Mailing Address:** 81 CEDAR CIR BOYNTON BEACH, FL 334369101 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHEITLER, MARY 81 CEDAR CIR BOYNTON BEACH, FL 334369101 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition SCHEITLER, MARY Name: Name: 81 CEDAR CIR Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: Title: () Delete Title: 1VP (X) Change ( ) Addition REINDERS, ANN MARIE Name: ZALUTKO, SONJA Name: Address: 10772 LAKE WYNDS CT Address: 7561 CITRONELLA STREET City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: BOYNTON BEACH, FL 33437 Title: 2VP () Delete Title: 2VP (X) Change ( ) Addition GAVLICK, JANE REVIE, SUE Name: Name: Address: 2144 SW 36TH TERR Address: T-208 N. IBIS DRIVE City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: BRINY BREEZES, FL 33435 Title: () Delete Title: (X) Change ( ) Addition RIESS, JOAN Name: DOYLE, MARIE Name: 1811 SE 5TH AVE 3102 HAYDEN COURT Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: (X) Change ( ) Addition MADYDA, MARIANNE MADYDA, MARIANNE Name: Name: 8125 CHATUGO CT 8125 CHATUGA CT Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

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: MARY SCHEITLER P 04/02/2009