

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 21, 2009  
Secretary of State**

DOCUMENT# N07000010118

Entity Name: OUR LADY OF GOOD REMEDY MAGNIFICAT CHAPTER, INC.

**Current Principal Place of Business:**

3087 WATERFORD DRIVE  
TALLAHASSEE, FL 32309 FL

**New Principal Place of Business:**

**Current Mailing Address:**

3087 WATERFORD DRIVE  
TALLAHASSEE, FL 32309 FL

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MADDOX, DOLORES  
3087 WATERFORD DRIVE  
TALLAHASSEE, FL 32309 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:**

Title: PRES ( ) Delete  
Name: MADDOX, DOLORES G  
Address: 3087 WATERFORD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ATRE ( ) Delete  
Name: NWABUZOR, BRIDGET  
Address: 8231 CHICKASAW TRAIL  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TRES ( ) Delete  
Name: JENSEN, MAGDA  
Address: 8231 CHICKASAW TRAIL  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SEC ( ) Delete  
Name: CHRISAWN, MARGARET  
Address: 2505 COLLEEN DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SEC (X) Change ( ) Addition  
Name: TONI, HEPBURN  
Address: 3301 KILLALA WAY  
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: ASEC ( ) Delete  
Name: NEMOURS, DJANAN  
Address: 1719 AUGUSTINE PLACE  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STMB ( ) Delete  
Name: SOBON, THERESA  
Address: 26 VENCENT DRIVE EAST  
City-St-Zip: MIDWAY, FL 32343 US

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: DOLORES G. MADDOX

PRES

07/21/2009

Electronic Signature of Signing Officer or Director

Date