

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007187

FILED
Feb 08, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA BONSAI CLUB, INC.

Current Principal Place of Business:

1039 BRAEMAR DRIVE
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

1039 BRAEMAR DRIVE
WINTER PARK, FL 32792

New Mailing Address:

9620 MYRTLE CREEK LANE
ORLANDO, FL 32832

FEI Number: 26-3332661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RACINSKI, SANDRA
1039 BRAEMAR DRIVE
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

PIKEL, PAUL
9620 MYRTLE CREEK LANE
ORLANDO, FL 32832 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: PAUL PIKEL

02/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAVIGNE, ADAM
Address: 1107 3RD ST
City-St-Zip: ORLANDO, FL 32824

Title: DVP () Delete
Name: SMITH, STEVE
Address: 113 W OAKLAND AVE
City-St-Zip: OAKLAND, FL 34670

Title: DT () Delete
Name: RACINSKI, SANDRA
Address: 1039 BRAEMAR DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: DCS () Delete
Name: LAVIGNE, ADAM
Address: 1107 3RD ST
City-St-Zip: ORLANDO, FL 32824

Title: DRS () Delete
Name: HOAGG, ELIZABETH
Address: 320 E CHESTER STREET
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DCS (X) Change () Addition
Name: RACINSKI, SANDRA
Address: 1039 BRAEMAR DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: DT (X) Change () Addition
Name: PIKEL, PAUL
Address: 9620 MYRTLE CREEK LANE
City-St-Zip: ORLANDO, FL 32832

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: PAUL PIKEL

DT

02/08/2009

Electronic Signature of Signing Officer or Director

Date