

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08502

FILED
Jan 16, 2008
Secretary of State

Entity Name: SOROPTIMIST INTERNATIONAL OF HOLIDAY ISLES, FL., INC.

Current Principal Place of Business:

6644 POINSETTIA AV S
ST. PETERSBURG, FL 33707

New Principal Place of Business:

Current Mailing Address:

PO BOX 66073
ST. PETE BEACH, FL 33736

New Mailing Address:

FEI Number: 59-6153161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CATHERINE S. KURANT
6644 POINSETTIA AVENUE S.
ST. PETERSBURG, FL 33707 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: P () Delete
Name: CISEK, MARILYN
Address: 3123 B 39TH ST. S
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: VP () Delete
Name: PLETCHER, GALE
Address: 6001 51ST. ST S
City-St-Zip: ST. PETERSBURG, FL 33715

Title: T () Delete
Name: KURANT, CATHERINE S
Address: 6644 POINSETTIA AVENUE S.
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: D () Delete
Name: THOMPSON, DORIS
Address: 17700-1ST ST
City-St-Zip: REDINGTON SHORES, FL 33708

Title: S () Delete
Name: HUBRIC, BEVERLY
Address: 8732 KENWOOD ROAD
City-St-Zip: SEMINOLE, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HUBRIC, BEVERLY
Address: 8732 KENWOOD ROAD
City-St-Zip: SEMINOLE, FL 33777

Title: VP (X) Change () Addition
Name: TAYLOR, BARBARA
Address: 6772 COLONY DRIVE S
City-St-Zip: ST. PETERSBURG, FL 33705

Title: T (X) Change () Addition
Name: KURANT, CATHERINE S
Address: 6644 POINSETTIA AVENUE S.
City-St-Zip: SAINT PETERSBURG, FL 33707

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

Title: S (X) Change () Addition
Name: SANDERSON, MARLENE
Address: 135 FIRST STREET E #204
City-St-Zip: TIERRA VERDE, FL 33715

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: CATHY SUE KURANT

T

01/16/2008

Electronic Signature of Signing Officer or Director

Date