2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10257

FILED Mar 04, 2009 Secretary of State

Entity Name: THE UNITED WOMEN'S CLUB OF LAKELAND, INC.

Current Principal Place of Business: New Principal Place of Business: 1515 WILLIAMSBURG SQ LAKELAND, FL 33803 **Current Mailing Address: New Mailing Address:** 1515 WILLIAMSBURG SQ LAKELAND, FL 33803 US FEI Number: 59-0757331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LANNON, BERNADETTE 6775 LAKE CLARK DR LAKELAND, FL 33813 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 BELL, JUNE Name: Name: 4840 DETER RD Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: Title: 2VP (X) Delete Title: () Change () Addition SPARGOS, SHIRLEY Name: Name: Address: 1514 HUNTINTON ST Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: () Delete Title: (X) Change () Addition DERK, BARBARA WALKER, JULIANA Name: Name: 3125 NEW JERSEY RD 5570 HIGHLANDS VISTA CIRCLE Address: Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33813 Title: 1VP () Delete Title: 1VP (X) Change () Addition Name: ROBERTSON, JEANETTE Name: WIGGINS, DONA 1050 CARACARA CIR N 6353 CEDAR LANE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: (X) Change () Addition BOYENTON, MARY WIGGINS, DONA Name: Name: 1001 CARPENTER WAY APT D 207 6353 CEDAR LANE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33813 Title: () Delete Title: (X) Change () Addition TRUEBLOOD, ALICE K LANNON, BERNADETTE M Name: Name: Address: 532 KELSEY ST Address: 6775 LAKE CLARK DR. LAKELAND, FL 33803 LAKELAND, FL 33813 City-St-Zip: 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: BERNADETTE LANNON TREA 03/04/2009