## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 24, 2006 8:00 am Secretary of State DOCUMENT # N11739 04-24-2006 90368 022 \*\*\*\*61.25 HERNANDO COUNTY LA SERTOMA CLUB, INC. Principal Place of Business Mailing Address 5210 FOREST GLENN DRIVE SPRING HILL FL 34607 5210 FOREST GLENN DRIVE SPRING HILL FL 34607 2. Principal Place of Business 3. Mailing Address Suite Apt # etc Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2286238 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KUHLOW, MARILYN A Street Address (P.O. Box Number is Not Acceptable) 5210 FOREST GLENN DRIVE SPRING HILL FL 34607 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed mame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. TITLE ☐ Change X Addition ☐ Delete TITLE LEE, NANCY NAME Kuhlow, Marilyn NAME 5210 Forest Glenn Drive STREET ADDRESS 7368 ACORN CIRCLE STREET ADDRESS SPRING HILL FL 34606 Spring Hill, FL CITY-ST-ZIP 1VP ☐ Delete TITLE ☐ Change ☐ Addition SUTTON, JOAN NAME NAME 10242 SWANSON CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34606 CITY-ST-7IP 2VP TITLE Delete TITLE ☐ Change ■ Addition NAME DYCKSON, HELEN NAME STREET ADDRESS 10271 BERNARDA CT STREET ADDRESS CITY-ST-7IP SPRING HILL FL 34608 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME HILTON, RUTH NAME STREET ADDRESS 1174 HALLCREST AVE STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34608 CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZiP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE:

Larelyn ( Recheau

4/10/06 (36)66-0040

**FILED**