

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14313

FILED
May 01, 2009
Secretary of State

Entity Name: GREENWOOD CIVIC CLUB, INC.

Current Principal Place of Business:

S.R. 169
GREENWOOD, FL 32443

New Principal Place of Business:

Current Mailing Address:

PO BOX 389
GREENWOOD, FL 32443

New Mailing Address:

FEI Number: 59-2957344 FEI Number Applied For () 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:

BLIGHTON, LARRY L.
4167 BRYAN ST
P. O. BOX 271
GREENWOOD, FL 32443 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:

Title: PD () Delete
Name: BLIGHTON, LARRY
Address: 9167 FORT DR ST
City-St-Zip: GREENWOOD, FL 32443

Title: TSD () Delete
Name: BLIGHTON, LILLIAN
Address: 2176 FORT RD
City-St-Zip: GREENWOOD, FL 32943

Title: VP () Delete
Name: MERCER, SYLVIA
Address: BLUE SPRINGS RD
City-St-Zip: GREENWOOD, FL 32443

Title: D () Delete
Name: TYUS, SANDRA K
Address: PO BOX 30
City-St-Zip: GREENWOOD, FL 32443

Title: D () Delete
Name: DUNAWAY, SARAH
Address: 4167 BRYAN ST
City-St-Zip: GREENWOOD, FL 32443

Title: VP () Delete
Name: BLIGHTON, TED
Address: 4038 BRYAN ST
City-St-Zip: GREENWOOD, FL 32443

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: BLIGHTON, SARAH
Address: 4167 BRYAN ST
City-St-Zip: GREENWOOD, FL 32443

Title: DP (X) Change () Addition
Name: DUNAWAY, TED
Address: 4038 BRYAN ST
City-St-Zip: GREENWOOD, FL 32443

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: LILLIAN BLIGHTON

TSD

05/01/2009

Electronic Signature of Signing Officer or Director

Date