## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19370

FILED Apr 19, 2009 Secretary of State

Entity Name: THE PARKLAND WOMAN'S CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

CYPRESSHEAD CLUBHOUSE 7501 S. CYPRESSHEAD DRIVE PARKLAND, FL 33067

Current Mailing Address: New Mailing Address:

5933 W. HILLSBORO BLVD. PWC

#101 P.O. BOX 970293

PARKLAND, FL 33067 US COCONUT CREEK, FL 33097 US

FEI Number: 63-0947050 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:

MONAS, ADRIENNE
6225 NW 74 CT
PARKLAND, FL 33067 US
HELLER, MARYFRANCES
7811 SEQUOIA LANE
PARKLAND, FL 33067 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: MARYFRANCES HELLER 04/19/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 MIRABELLO, PATRICIA
 Name:
 GRABELSKY, CINDY

 Address:
 10977 NW 61 COURT
 Address:
 6390 NW 41 TERRACE

City-St-Zip: PARKLAND, FL 33076 US City-St-Zip: COCONUT CREEK, FL 33073 US

Title: VP1 ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RICCARDI, FRAN
 Name:

 Address:
 7822 NW 62 TERRACE
 Address:

 City-St-Zip:
 PARKLAND, FL 33067 US
 City-St-Zip:

Title: TREA () Delete Title: () Change () Addition

 Name:
 HELLER, MARYFRANCES
 Name:

 Address:
 7811 SEQUOIA LANE
 Address:

 City-St-Zip:
 PARKLAND, FL 33067 US
 City-St-Zip:

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition

 Name:
 DELEU, CHARLOTTE
 Name:
 SCHARF, TRACI

 Address:
 5603 NW 58 TERRACE
 Address:
 7605 ALPINE LANE

 City-St-Zip:
 CORAL SPRINGS, FL 33067
 City-St-Zip:
 PARKLAND, FL 33067 US

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: MARYFRANCES HELLER TREA 04/19/2009