

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20380

FILED
Apr 07, 2009
Secretary of State

Entity Name: HEMLOCK FOUNDATION OF FLORIDA, INC.

Current Principal Place of Business:

9005 SCARSDALE CT., #H
W MELBOURNE, FL 329042012

New Principal Place of Business:

Current Mailing Address:

PO BOX 121093
W MELBOURNE, FL 329121093

New Mailing Address:

FEI Number: 59-2821314 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLAMM, DONNA
9005 SCARSDALE CT., #H
MELBOURNE, FL 329042012 US

Name and Address of New Registered Agent:

KLAMM, DONNA
9005 SCARSDALE CT., #H
WEST MELBOURNE, FL 329042012 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: _____

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: KLAMM, DONNA P/D
Address: 9005-H SCARSDALE CT.
City-St-Zip: WEST MELBORNE, FL 32904

Title: VD () Delete
Name: WESTERFIELD, PORTIA
Address: 4115 CREEK WOODS LANE
City-St-Zip: MULBERRY, FL 33860

Title: RSD () Delete
Name: PLAISANT, ANNELIES
Address: 3914 NW 37 PLACE
City-St-Zip: GAINESVILLE, FL 326066145

Title: TD () Delete
Name: CONWAY, MARTHA
Address: 711 AUTUMN GLEN DR
City-St-Zip: MELBOURNE, FL 32940

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: KLAMM, DONNA
Address: 9005-H SCARSDALE CT.
City-St-Zip: WEST MELBOURNE, FL 32904

Title: V-SD (X) Change () Addition
Name: WESTERFIELD, PORTIA
Address: 4115 CREEK WOODS LANE
City-St-Zip: MULBERRY, FL 33860

Title: TD (X) Change () Addition
Name: CONWAY, MARTHA
Address: 711 AUTUMN GLEN DR
City-St-Zip: MELBOURNE, FL 32940

Title: D (X) Change () Addition
Name: PLAISANT, ANNELIES
Address: 3914 NW 37TH PLACE
City-St-Zip: GAINESVILLE, FL 326066145

Title: D () Change (X) Addition
Name: RINALDI, MARGUERITE
Address: 21685 SUNGATE COURT
City-St-Zip: ESTERO, FL 339282392

Title: D () Change (X) Addition
Name: BILLINGS, NAN
Address: 3429 TALLYWOOD LANE
City-St-Zip: SARASOTA, FL 34237

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: DONNA KLAMM

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date