

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21988

FILED
Feb 16, 2009
Secretary of State

Entity Name: TRI-COUNTY FLORIDA, CHAPTER #317, INC.

Current Principal Place of Business:

2224 5TH COURT SE
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

2224 5TH COURT SE
VERO BEACH, FL 32962 US

New Mailing Address:

FEI Number: 59-2748620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, ANN
2224 5TH COURT SE
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

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: SEAVEY, LISA
Address: 779 SW ANDREW ROAD
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: VPD () Delete
Name: ISENHOUR, DEBORAH
Address: 165 CYCLONE DRIVE
City-St-Zip: FORT PIERCE, FL 34945

Title: SD () Delete
Name: JODY, SENG
Address: 8365 102ND AVE.
City-St-Zip: VERO BEACH, FL 32967

Title: TD () Delete
Name: WOOD, ANN
Address: 2224 5TH COURT SE
City-St-Zip: VERO BEACH, FL 32962 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SENG, JODY
Address: 8365 102ND AVE.
City-St-Zip: VERO BEACH, FL 32967 US

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

Title: SD (X) Change () Addition
Name: BUSTIN, BEVERLY
Address: 115 NE BEACH AVE.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: () Change () Addition
Name:
Address:
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: ANN B. WOOD

TD

02/16/2009

Electronic Signature of Signing Officer or Director

Date