

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22169

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: EAST HILLSBOROUGH CUPIDETTES CLUB, INC.

**Current Principal Place of Business:**

7702 W. RIVERCHASE DRIVE  
TEMPLE TERRACE, FL 33637 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 1662  
PLANT CITY, FL 335641662 US

**New Mailing Address:**

FEI Number: 59-2848526      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WRIGHT, BETTY J.  
7702 W. RIVERCHASE DRIVE  
TEMPLE TERRACE, FL 336375630 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: WRIGHT, BETTY J.,  
Address: 7702 W. RIVERCHASE DRIVE  
City-St-Zip: TEMPLE TERRACE, FL 336375630

Title: VD ( ) Delete  
Name: SWAIN, PAMELA Y.  
Address: 3306 N LAKE DR  
City-St-Zip: PLANT CITY, FL 33567

Title: D ( ) Delete  
Name: SULLIVAN, SANDRA  
Address: 1601 E ALABAMA STREET, APT. #403  
City-St-Zip: PLANT CITY, FL 33566

Title: RS ( ) Delete  
Name: MARION, ELOISE B.  
Address: 823 SOUTH DELANEY AVENUE  
City-St-Zip: AVON PARK, FL

Title: TD ( ) Delete  
Name: KITCHEN, CAROLYN A.  
Address: 2205 N JOHNSON STREET  
City-St-Zip: PLANT CITY, FL 33566

Title: SD ( ) Delete  
Name: WIGGINS, GARDENIA D  
Address: 1501 E TENNESSEE ST  
City-St-Zip: PLANT CITY, FL 33566

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BETTY J. WRIGHT

Electronic Signature of Signing Officer or Director

PRES

04/30/2006

\_\_\_\_\_ Date