2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31601

FILED Apr 15, 2009 Secretary of State

Entity Name: SPRINGFIELD IMPROVEMENT ASSOCIATION AND WOMAN'S CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 210 W. SEVENTH ST. JACKSONVILLE, FL 32206 **Current Mailing Address: New Mailing Address:** 210 W. SEVENTH ST JACKSONVILLE, FL 32206 FEI Number: 59-2989134 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: THOMPSON, DEBBIE DAHLSEID, JANET 1854 PEARL STREET 205 E. 7TH STREET JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206 US 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: JANET P. DAHLSEID 04/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition THOMPSON, DEBBIE Name: Name: 1854 PEARL STREET Address: Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: () Change () Addition DAHLSEID, JANET Name: Name: Address: 205 E. 7TH STREET Address: City-St-Zip: JACKSONVILLE, FL 322064511 City-St-Zip: Title: () Delete Title: () Change () Addition SNYDER, ROSE Name: Name: Address: 1820 MARKET STREET Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: () Change () Addition BEVERLY, MILLER S Name: Name: Address: 104 E. 5TH STREET Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: () Change () Addition NOONAN, SUSAN Name: Name: 45 4TH STREET W Address: Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: () Change () Addition POTCHIK, CHRISTIE Name: Name: Address: 1226 MARKET ST Address: JACKSONVILLE, FL 32206 City-St-Zip: 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: JANET P. DAHLSEID TREA 04/15/2009