2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N33314

Entity Name: ZONTA CLUB OF PUNTA GORDA - PORT CHARLOTTE AREA FOUNDATION, INC.

Current Principal Place of Business:

519 MATARES DRIVE
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

519 MATARES DRIVE
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 65-0216595 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUSK, LINDA
519 MATARES DR
PUNTA GORDA, FL 33950 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: VD ( ) Delete
Name: PALMER, KATHLEEN
Address: 26212 MADRAS COURT
City-St-Zip: PUNTA GORDA, FL 33983

Title: TD ( ) Delete
Name: HOWARTH, JOAN
Address: 650 ENNIS TERRACE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: SD ( ) Delete
Name: POLLARD, BARBARA
Address: 137 LELAND ST SW
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: PD ( ) Delete
Name: LUSK, LINDA
Address: 519 MATARES DRIVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: D ( ) Delete
Name: DOBY, PAT
Address: 1851 BANANA STREET SE
City-St-Zip: PORT CHARLOTTE, FL 33980

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:

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: LINDA LUSK PD 04/27/2009

Electronic Signature of Signing Officer or Director — Date