

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39527

FILED
Aug 20, 2009
Secretary of State

Entity Name: MEALS ON WHEELS OF CAPE CORAL, FLORIDA, INC.

Current Principal Place of Business:

505 SE 43RD ST., #A203
CAPE CORAL, FL 33904 US

New Principal Place of Business:

11542 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 US

Current Mailing Address:

505 SE 43RD ST., #A203
CAPE CORAL, FL 33904 US

New Mailing Address:

11542 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 US

FEI Number: 65-0233565 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DELLORTO, MARY
505 SE 43RD ST., #A203
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

DELLORTO, MARY
11542 ROYAL TEE CIRCLE
CAPE CORAL, FL 33991 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:

08/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: DELLORTO, MARY
Address: 505 SE 43RD ST., A203
City-St-Zip: CAPE CORAL, FL 33904

Title: TRUS () Delete
Name: GARVEY, VIRGINIA
Address: 511 EL DORADO PKWY W
City-St-Zip: CAPE CORAL, FL 33914

Title: DC () Delete
Name: MACGREGOR, ROBERT
Address: 318 SE 19TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: TRUS () Delete
Name: TOSCANO, DORA
Address: 5761 FLAMINGO DR
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: DELLORTO, MARY
Address: 11542 ROYAL TEE CIRCLE
City-St-Zip: CAPE CORAL, FL 33991

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: MARY DELLORTO

DST

08/20/2009

Electronic Signature of Signing Officer or Director

Date