

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44866

FILED
Apr 28, 2009
Secretary of State

Entity Name: ORLANDO BUSINESS & PROFESSIONAL WOMEN'S CLUB, INC.

Current Principal Place of Business:

415 WARRENTON ROAD
WINTER PARK, FL 32792 US

New Principal Place of Business:

132 MAITLAND AVENUE
ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

P.O. BOX 4357
WINTER PARK, FL 32793 US

New Mailing Address:

FEI Number: 59-3077350 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCARDLE, CRISTINA S
11721 DELWICK DRIVE
WINDERMERE, FL 34786 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: P () Delete
Name: CRAIG, EVANA
Address: 13438 LAKE TURNBERRY CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: VP () Delete
Name: STEWARD, MELINDA M
Address: 3207 LOWNDES DR
City-St-Zip: WINTER PARK, FL 32792

Title: S () Delete
Name: SUSAN, PAYTON
Address: 2023 MOUNT VERNON ST
City-St-Zip: ORLANDO, FL 32803

Title: T () Delete
Name: MCARDLE, CRISTINA S
Address: 11721 DELWICK DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KRZEWSKI, EVA
Address: 132 MAITLAND AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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

Title: VP (X) Change () Addition
Name: HOLLY, LUISI J
Address: 4700 MILLENIA BLVD SUITE 175
City-St-Zip: ORLANDO, FL 32839

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

Title: S () Change (X) Addition
Name: JOSEPHINE, ROGERS M
Address: 109 BRENTWOOD DRIVE
City-St-Zip: SANFORD, FL 32771

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: CRISTINA S. MCARDLE

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date