

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45650

FILED
May 18, 2008
Secretary of State

Entity Name: MOUNT DORA AREA JUNIOR WOMAN'S CLUB, INC.

Current Principal Place of Business:

32625 EQUESTRIAN TRAIL
SORRENTO, FL 32776

New Principal Place of Business:

23217 OAK CLUSTER DR.
SORRENTO, FL 32776

Current Mailing Address:

PO BOX 784
MOUNT DORA, FL 327570784

New Mailing Address:

FEI Number: 59-3091651 **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:

Name and Address of New Registered Agent:

YONKE, LISA M
23217 OAK CLUSTER DRIVE
SORRENTO, FL 32776 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SEMENTO, SHARRON
Address: 22 CYPRESS DRIVE
City-St-Zip: EUSTIS, FL 32726

Title: PD () Delete
Name: KOZLOWSKI, BILLYE
Address: 32625 EQUESTRIAN TRAIL
City-St-Zip: SORRENTO, FL 32776

Title: TD () Delete
Name: YONKE, LISA M
Address: 23217 OAK CLUSTER DRIVE
City-St-Zip: SORRENTO, FL 32776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: YONKE, LISA M
Address: 23217 OAK CLUSTER DR.
City-St-Zip: SORRENTO, FL 32776

Title: TD (X) Change () Addition
Name: MORGAN, HOLLIE A
Address: 1785 MORNINGSIDE DR.
City-St-Zip: MOUNT DORA, FL 32757

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: HOLLIE A. MORGAN

TD

05/18/2008

Electronic Signature of Signing Officer or Director

Date