2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45758

FILED Apr 14, 2010 Secretary of State

Entity Name: RIO LINDO GARDEN CLUB OF PORT ST. LUCIE INC.

Current Principal Place of Business: New Principal Place of Business:

2775 SE EAGLE DRIVE 2074 SW SALMON RD

PORT SAINT LUCIE, FL 349848919 US PORT SAINT LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

2775 SE EAGLE DRIVE 2074 SW SALMON RD

PORT SAINT LUCIE, FL 349848919 US PORT SAINT LUCIE, FL 34953 US

FEI Number: 65-0296781 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:

MITCHELL, DONNA LYDON, CONCHETTA E 2775 SE EAGLE DRIVE 2074 SW SALMON RD

PORT SAINT LUCIE, FL 349848919 US PORT SAINT LUCIE, FL 34953 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: CONCHETTA LYDON 04/14/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: I

Name: LYDON, CONCHETTA E Address: 2074 SW SALMON RD

City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: VP

Name: BUKOWSKI, MARIE

Address: 1704 SE HAVERFORD STREET
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: T

Name: ENZIAN, DARLENE R Address: 3156 SW BRIDGE ST

City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: VP

Name: KING, JOLEEN

Address: 1016 SE KITCHING COVE

City-St-Zip: PORT SAINT LUCIE, FL 34952 US

Title:

Name: YATES, LINDA Address: 1491 SE NANCY LANE

City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: S

Name: OPETT, VIRGINIA

Address: PORT ST. LUCIE BLVD. - PMB #141
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

I hereby 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 all other like empowered.

SIGNATURE: CONCHETTA LYDON P 04/14/2010