

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46642

FILED
Jan 25, 2009
Secretary of State

Entity Name: PLANTATION ACRES WOMEN'S CLUB, INC.

Current Principal Place of Business:

9715 W BROWARD BLVD, PMB 142
PLANTATION, FL 333242352 US

New Principal Place of Business:

Current Mailing Address:

9715 W BROWARD BLVD, PMB 142
PLANTATION, FL 333242352 US

New Mailing Address:

FEI Number: 65-0344980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACAVEDO, CARMELLA
8100 W. SUNRISE BLVD
PLANTATION, FL 33323 US

Name and Address of New Registered Agent:

ORTON, CHARLOTTE
1112 N W 79 79TH DR
PLANTATION, FL 33322 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: CHARLOTTE ORTON

01/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ACEVEDO, CARMELA
Address: 8100 W SUNRISE BLVD.
City-St-Zip: PLANATION, FL 33332

Title: BM () Delete
Name: ORTON, MIKKI
Address: 1112 NW 79 DR
City-St-Zip: PLANATION, FL 33322

Title: V () Delete
Name: KHAN, JOAN
Address: 11550 NW 20 ST
City-St-Zip: PLANTATION, FL 33323

Title: BM () Delete
Name: BREHANON, LINDA
Address: 12340 NW 5 CT
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ORTON, CHARLOTTE
Address: 1112 N W 79TH DR
City-St-Zip: PLANATION, FL 33322

Title: VP (X) Change () Addition
Name: KHAN, JOAN
Address: 11550 N W 20THJ ST
City-St-Zip: PLANATION, FL 33323

Title: BM (X) Change () Addition
Name: ACEVEDO, CARMELA
Address: 8100 W. SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33322

Title: VP (X) Change () Addition
Name: BUCHANAN, LINDA
Address: 12340 NW 5 CT
City-St-Zip: PLANTATION, FL 33322

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: CHARLOTTE ORTON

PRES

01/25/2009

Electronic Signature of Signing Officer or Director

Date