2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000933

FILED Jan 05, 2009 Secretary of State

Entity Name: PIONEER VILLAGE SOCIAL COMMITTEE, INC.

Current Principal Place of Business: New Principal Place of Business: 17200 PIONEER STREET NORTH FORT MYERS, FL 33917 **Current Mailing Address: New Mailing Address:** 17200 PIONEER STREET 17200 PIONEER STREET NORTH FORT MYERS, FL 33917 F5-34 NORTH FORT MYERS, FL 33917 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RANSOM, WILLAIM J PRES RANSOM, WILLAIM J PRES 17200 PIONEER ST. E5-334 17200 PIONEER ST. E5-34 NORTH FORT MYERS, FL 33917 NORTH FORT MYERS, FL 33917 US 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: 01/05/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TREA () Delete () Change () Addition PHEIL. CAROL Name: Name: 17200 PIONEER ST. C1-05 Address: Address: City-St-Zip: N. FT. MYERS, FL 33917 US City-St-Zip: Title: Title: () Delete () Change () Addition BOELENS, CHARLENE Name: Name: Address: 17200 PIONEER STREET E5-8 Address: City-St-Zip: NORTH FORT MYERS, FL 33917 US City-St-Zip: Title: () Delete Title: () Change () Addition WATSON, PAUL Name: Name: Address: 17200 PIONEER ST. E5-24 Address: City-St-Zip: N. FT. MYERS, FL 33917 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: STEPHENS, DONALD Name: 34 S. PIONEER ST. Address: Address: City-St-Zip: N.FT.MYERS, FL 33917D US City-St-Zip: Title: () Delete Title: () Change () Addition RUNYON, BARBARA Name: Name: 17200 PIONEER ST.E1-10 Address: Address: City-St-Zip: N.FT.MYERS, FL 33917 US City-St-Zip: Title: () Delete Title: () Change () Addition BERKEY, BEVERLY Name: Name: Address: 16772 CHURCH DR. Address: N.FT.MYERS, FL 33917 US City-St-Zip: 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: BEVERLY BERKEY SEC. 01/05/2009