

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005229

FILED
Apr 24, 2009
Secretary of State

Entity Name: HOLMES BEACH CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

ISLAND BRANCH LIBRARY
5701 MARINA DRIVE
HOLMES BEACH, FL 34217 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1944
HOLMES BEACH, FL 34218 US

New Mailing Address:

3104 AVENUE E
HOLMES BEACH, FL 34217 US

FEI Number: 65-0623626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMBERGER, SHIRLEY D
512-71 ST STREET
HOLMES BEACH, FL 34217 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: WIEDORN, AL
Address: 7007 GULF DR
City-St-Zip: HOLMES BCH, FL 34217

Title: S () Delete
Name: ROMBERGER, SHIRLEY D
Address: 512 71ST. ST.
City-St-Zip: HOLMES BEACH, FL 34217

Title: T () Delete
Name: STRICKLAND, MARY
Address: 3104 AVE E
City-St-Zip: HOLMES BCH, FL 34217

Title: VP () Delete
Name: STRICKLAND, LOUIE
Address: 3104 AVE E
City-St-Zip: HOLMES BCH, FL 34217

Title: D () Delete
Name: WIEDORN, CLARE
Address: 7007 GULF DR
City-St-Zip: HOLMES BEACH, FL 34217

Title: D () Delete
Name: HINES, BARBARA
Address: 119 81ST ST.
City-St-Zip: HOLMES BEACH, FL 34217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: SHIRLEY D. ROMBERGER

SEC

04/24/2009

Electronic Signature of Signing Officer or Director

Date