

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005402

FILED
Apr 29, 2009
Secretary of State

Entity Name: SAINTS NETBALL AND CULTURAL CLUB, INC.

Current Principal Place of Business:

3670 NW 27TH STREET
LAUDERDALE LAKES, FL 33311

New Principal Place of Business:

Current Mailing Address:

3670 NW 27TH STREET
LAUDERDALE LAKES, FL 33311

New Mailing Address:

FEI Number: 65-0710733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OMPHROY, MARLENE
3670 NW 27TH STREET
LAUDERDALE LAKES, FL 33311 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: D () Delete
Name: OMPHROY, MARLENE
Address: 3670 NW 27TH STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: D () Delete
Name: MCINTOSH, PAULINE
Address: 9560 GLACIA ST
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: DUNBAR, ALICIA
Address: 2674 NW 68TH WAY
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: D () Delete
Name: HALL, JUDITH
Address: 9037 NW 25TH CT
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: DUNKLEY, LISA
Address: 7460 NW 34TH STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: ROGERS, HAZELLE
Address: 2769 NW 36TH AVE
City-St-Zip: LAUDERDALE LAKES, FL 33311

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:

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: MARLENE OMPHROY

TREA

04/29/2009

Electronic Signature of Signing Officer or Director

Date