2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005689

Apr 26, 2008 Secretary of State

Entity Name: NORTHWEST FLORIDA, UNIT 219, OF THE AMERICAN CONTRACT BRIDGE LEAGUE, INC.

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

3339 EDGEWATER DRIVE 604 LANG ROAD

GULF BREEZE, FL 32563 US FORT WALTON BEACH, FL 32547 US

Current Mailing Address: New Mailing Address:

3339 EDGEWATER DRIVE 604 LANG ROAD

GULF BREEZE, FL 32563 US FORT WALTON BEACH, FL 32547 US

FEI Number: 59-3433209 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:

WESTHOLM, LARRY R
4190 WESTFIELD ROAD
PENSACOLA, FL 32503 US
BURKE, CARLA
13621 PERDIDO KEY DRIVE
UNIT 1003W
PENSACOLA, FL 32507 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: CARLA BURKE 04/26/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: STD () Delete Title: STD (X) Change () Addition

Name: HUKE, KAY Name: JARBOE, DANIEL L

Address: 3339 EDGEWATER DRIVE Address: 604 LANG ROAD

City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: VP () Delete Title: VP (X) Change () Addition Name: WATERFIELD, VIRGINIA Name: MARR, GAYLE

Address: 4046 BROKEN ARROW COURT Address: 225D ALCONESE AVE

City-St-Zip: DESTIN, FL 32541 City-St-Zip: FORT WALTON BEACH, FL 32548 US

Title: P () Delete Title: P (X) Change () Addition

Name: WESTHOLM, LARRY Name: BURKE, CARLA

Address: 4190 WESTFIELD ROAD Address: 13621 PERDIDO KEY DRIVE UNIT 1003W

City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32507

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: DANIEL L. JARBOE STD 04/26/2008