

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000833

FILED
Mar 23, 2009
Secretary of State

Entity Name: BOYS & GIRLS CLUBS OF CHARLOTTE COUNTY, INC.

Current Principal Place of Business:

21450 GIBRALTER DR.
STE. 10
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

21450 GIBRALTER DR.
STE. 10
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 65-0725247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUENTHER, ROSCELYN
21450 GIBRALTER DR.
STE. 10
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

DORLER, LYNN
21450 GIBRALTER DR.
STE. 10
PORT CHARLOTTE, FL 33952 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: LYNN DORLER

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: BP () Delete
Name: DEVOS, SARA
Address: 13970 ROYAL POINTE DR.
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VPB () Delete
Name: GREENLAND, PAULA
Address: 300 BAY HEIGHTS
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: T () Delete
Name: KOCH, REX
Address: 225 W. VIRGINIA AVE.
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: PBP () Delete
Name: MALLISON, ANDY
Address: 2811 TAMIAAMI TRL. STE. P
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: BM () Delete
Name: DUNCAN, CONNIE
Address: 19720 TOLEDO BLADE BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33948 US

Title: BM () Delete
Name: BROOKS, MITCHELL T
Address: 2811 - P TAMIAAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: BM (X) Change () Addition
Name: GREENLAND, PAULA
Address: 300 BAY HEIGHTS
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: T (X) Change () Addition
Name: PEREZ, JOHN
Address: 101 EAST RETTA ESPLANADE
City-St-Zip: PUNTA GORDA, FL 33950 US

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

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

Title: BVP (X) Change () Addition
Name: GRANT, LORRAINE
Address: 1441 TAMIAAMI TRAIL # 275
City-St-Zip: PORT CHARLOTTE, FL 33948

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: LYNN DORLER

CPO

03/23/2009

Electronic Signature of Signing Officer or Director

Date