

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004671

FILED
Jan 07, 2009
Secretary of State

Entity Name: IKEBANA INTERNATIONAL, CHAPTER 65, INC.

Current Principal Place of Business:

1717 WINFIELD RD S
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

1717 WINFIELD RD S
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 59-3535742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOSS, BARBARA
1717 WINFIELD RD S
CLEARWATER, FL 33756 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: HATFIELD, BETSY
Address: 4233 CHESTERFIELD CIRCLE
City-St-Zip: PALM HARBOR, FL 34683

Title: 1VPD () Delete
Name: NOUJAIM, MONIQUE G
Address: 6532 HILLSIDE AVE. N.
City-St-Zip: SEMINOLE, FL 33772

Title: 2VP () Delete
Name: BRENNAN, CAROL
Address: 4744 WOLFRAM LANE
City-St-Zip: NEW PORT RICHEY, FL 34683

Title: 3VPD () Delete
Name: SALMOM, MARGARET
Address: 3107 ENISGROVE E
City-St-Zip: PALM HARBOR, FL 34683

Title: T () Delete
Name: BOURIN, GERRY
Address: 14803 SEMINOLE TRAIL
City-St-Zip: SEMINOLE, FL 33776

Title: () Delete
Name:
Address:
City-St-Zip:

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: 3VPD (X) Change () Addition
Name: GROSHONG, BET
Address: 7920 OLIVER RD.
City-St-Zip: LARGO, FL 33777

Title: T (X) Change () Addition
Name: BOURLON, GERRY
Address: 14803 SEMINOLE TRAIL
City-St-Zip: SEMINOLE, FL 33776

Title: SECY () Change (X) Addition
Name: SHARROW, MARY
Address: 5178 PINNACLE DR.
City-St-Zip: OLDSMAR, FL 34677

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: BETSY HATFIELD

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date