

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2009
Secretary of State

DOCUMENT# 701986

Entity Name: TRIANGLE CLUB, INC.

Current Principal Place of Business:

1369 OKEECHOBEE ROAD
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

1369 OKEECHOBEE ROAD
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 59-0919735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CACOPARDO, RICHARD
1369 OKEECHOBEE ROAD
WEST PALM BEACH, FL 33401 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: T () Delete
Name: GIBAULT, GERRY
Address: P.O. BOX 728
City-St-Zip: PALM BEACH, FL 33480

Title: T () Delete
Name: COOK, KENNETH
Address: BOX 6006
City-St-Zip: LAKE WORTH, FL 33466

Title: T () Delete
Name: O'CONNELL, LINDA
Address: 321 CROTON WAY
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T () Delete
Name: ANDERSON, DAVID
Address: 3307 WASHINGTON ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: MARTINDALE, WALES
Address: 6B ATRIUM CIRCLE
City-St-Zip: ATLANTIS, FL 33462

Title: T (X) Change () Addition
Name: O'CONNELL, LINDA
Address: 808 UPLAND ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T (X) Change () Addition
Name: ANDERSON, DAVID C
Address: 3307 WASHINGTON ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: T () Change (X) Addition
Name: JAMISON, HENRY
Address: 216 MONTEREY
City-St-Zip: PALM BEACH, FL 33480

Title: T () Change (X) Addition
Name: LOGAN, JIM
Address: 515 S SEQUOIA DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

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: DAVID C. ANDERSON

T

03/13/2009

Electronic Signature of Signing Officer or Director

_____ Date