2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704972

FILED Jan 14, 2009 Secretary of State

Entity Name: OCEANSIDE GOLF AND COUNTRY CLUB INC

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

75 NORTH HALIFAX AVENUE 75 NORTH HALIFAX AVENUE ORMOND BCH, FL 321750367 US ORMOND BCH, FL 32176 US

Current Mailing Address: New Mailing Address:

P.O. BOX 367 P.O. BOX 367

ORMOND BCH, FL 321750367 US ORMOND BCH, FL 32175 US

FEI Number: 59-1004935 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HASKELL, THOMAS A 75 N HALÍFAX DRIVE ORMOND BEACH, FL 32176

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:

Date

Electronic Signature of Registered Agent

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete DUVA, CHUCK DR. FAVIS, MARTIN MR. Name: Name: 9 DEERSKIN LN. Address: 90 TIMBERLAKE LANE Address:

City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete Title: () Change () Addition

WOOD, JAMES Name: Name: Address: 209 PLEASANT VALLEY DR. Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip:

Title: () Delete Title: (X) Change () Addition UPCHURCH, JOHN Name: COLLINS, BONNIE MRS Name:

474 TRITON ROAD 220 RIVER BLUFF DRIVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32174

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

Name: LINDAHL, BRIAN Name: BULKO, KEITH MR. 2300 N. ATLANTIC AVE 63 COQUINA RIDGE WAY Address: Address: City-St-Zip: DAYTONA BEACH, FL 32118 City-St-Zip: ORMOND BEACH, FL 32174

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

LIEBELT, STEWART FLORES, PETER MR. Name: Name: 204 RIVER BLUFF DR. 403 IDLEWOOD DRIVE Address: Address: City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32176

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

LOUCKS, WILLIAM MR. BULKO, KEITH Name: Name: Address: 63 LOQUINA RIDGE WAY Address: 410 RIVERSIDE DRIVE ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32176 City-St-Zip: 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: KEITH BULKO Ρ 01/14/2009