2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# 721966

Entity Name: THE BENT PALM CLUB, INC.

Current Principal Place of Business:

935 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

935 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-1386959 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RASCHTE, CARL
35 ORMOND GREEN BLVD
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

RASCHKE, CARL
35 ORMOND GREEN BLVD
ORMOND BEACH, FL 32176 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: CARL RASCHKE 04/14/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NOVAK, JANET
Address: 935 OCEAN SHORES BLVD., 206
City-St-Zip: ORMOND BEACH, FL 32176

Title: ST ( ) Delete
Name: RASCHKE, CARL
Address: 935 OCEAN SHORE BLVD. #218
City-St-Zip: ORMOND BEACH, FL 32176

Title: D ( ) Delete
Name: CATALFAMO, JANICE
Address: 98 BRIDGEWATER LANE
City-St-Zip: ORMOND BEACH, FL 32176

Title: D ( ) Delete
Name: BARRY, MARGARET
Address: 30 WALBROOKE AVE.
City-St-Zip: STATEN ISLAND, NY 10301

Title: V ( ) Delete
Name: SPINELLI, WILLIAM
Address: 17080 BRIERCLIFF DR
City-St-Zip: ORLANDO, FL 32806

Title: D ( ) Delete
Name: TAFT, JOHN
Address: 70 PINE HILLS DR.
City-St-Zip: PINE CITY, NY 14871

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: WYLLIE, LAWRENCE
Address: 814 STRATFORD CT.
City-St-Zip: FRANKFORT, IL 60423

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: CARL RASCHKE ST 04/14/2009
Electronic Signature of Signing Officer or Director Date