

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743502

FILED
Jan 23, 2006
Secretary of State

Entity Name: EASTPOINTE COUNTRY CLUB, INC.

Current Principal Place of Business:

13535 EASTPOINTE BLVD.
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

13535 EASTPOINTE BLVD.
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 59-1839098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, ALLEN
13535 EAST POINTE BLVD
PALM BEACH GARDENS, FL 33418 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: S () Delete
Name: KENT, MADELAINE
Address: 6379 BRANDON STREET
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: PD () Delete
Name: CALIBEO, JOSEPH
Address: 6172 CELADON CIR
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: 2VP () Delete
Name: GREEN, MURRAY
Address: 13287 SAFFRON CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Delete
Name: O'BRIEN, CLAIRE
Address: 13535 EASTPOINTE BLVD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T () Delete
Name: POTASH, MONROE
Address: 13315 SAFFRON CIRCLE
City-St-Zip: PALM BCH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: 1VP (X) Change () Addition
Name: LEICHMAN, KENNETH
Address: 6490 EASTPOINTE PINES STREET
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S (X) Change () Addition
Name: LASSMAN, LAURA
Address: 6339 WOODTHRUSH COURT
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: PD (X) Change () Addition
Name: GREEN, MURRAY
Address: 13287 SAFFRON CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: 2VP (X) Change () Addition
Name: GREEN, RICHARD
Address: 13224 SAND GROUSE COURT
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MURRAY GREEN

P

01/23/2006

Electronic Signature of Signing Officer or Director

Date