2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743502

FILED Feb 09, 2007 Secretary of State

Entity Name: EASTPOINTE COUNTRY CLUB, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
	TPOINTE BLV CH GARDENS						
Current Mailing Address:				New Mailing Address:			
	TPOINTE BLV CH GARDENS						
FEI Number:	59-1839098	FEI Number Applied For	() FEI Nur	nber Not Appli	cable () C	ertificate of Status I	Desired ()
Name and	Address of C	urrent Registered Ag	ent:	Name and	Address of Nev	v Registered Ag	ent:
	LLEN T POINTE BLV CH GARDENS						
The above in the State		ubmits this statement f	or the purpose o	of changing it	s registered offic	e or registered a	gent, or both,
SIGNATUR							
Electronic Signature of Registered Age				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LEICHMAN, KEN 6490 EASTPOIN	Delete INETH ITE PINES STREET ARDENS, FL 33418		Title: Name: Address: City-St-Zip:	() Cr	ange () Addition	
Title: Name: Address: City-St-Zip:	LASSMAN, LAUF 6339 WOODTHF			Title: Name: Address: City-St-Zip:	2VP (X) CH LASSMAN, LAURA 6339 WOODTHRU PALM BEACH GAR	SH COURT	
Title: Name: Address: City-St-Zip:	GREEN, MURRA 13287 SAFFROI			Title: Name: Address: City-St-Zip:	() Ch	nange () Addition	
Title: Name: Address: City-St-Zip:	GREEN, RICHAR 13224 SAND GR			Title: Name: Address: City-St-Zip:	S (X) CH ALEXANDER, AILE 13224 SAND GRO PALM BEACH GAR	USE COURT	
Title: Name: Address: City-St-Zip:	POTASH, MONR 13315 SAFFROI			Title: Name: Address: City-St-Zip:	T (X) CF POTASH, MONRO 13836 WHISPERIN PALM BCH GARDE	NG LAKES LANE	

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 Ρ 02/09/2007