# 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Apr 24, 2009**
**Secretary of State**

DOCUMENT# 746702

**Entity Name:** CALOOSA GOLF AND COUNTRY CLUB, INC.

**Current Principal Place of Business:**

2115 CALOOSA BLVD.
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

**Current Mailing Address:**

2115 CALOOSA BLVD.
SUN CITY CENTER, FL 33573

**New Mailing Address:**

**FEI Number: 59-1971678** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

HOFER, LOREN PRES.
2115 CALOOSA BLVD.
SUN CITY CENTER, FL 33573 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: PO ( ) Delete
Name: HOFER, LOREN K
Address: 2007 WEDGE CT.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VPO ( ) Delete
Name: ALMAGUER, MICHAEL
Address: 1705 WEDGE CT.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: TO ( ) Delete
Name: CREWS, THOMAS
Address: 2005 WEDGE CT.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: SO ( ) Delete
Name: STANFIELD, JOHN
Address: 1932 EAST VIEW DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D ( ) Delete
Name: ISLER, ROBERT
Address: 2022 SO. PEBBLE BEACH BLVD.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: D ( ) Delete
Name: STROUBLE, BARBARA
Address: 1945 STERLING GLEN CT.
City-St-Zip: SUN CITY CENTER, FL 33573

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TO (X) Change ( ) Addition
Name: DUDEK, KATHERINE E
Address: 2221 NORTH CREEK COURT
City-St-Zip: SUN CITY CENTER, FL 33573

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

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

Title: D (X) Change ( ) Addition
Name: STRUBLE, BARBARA
Address: 323 NORTHWAY DRIVE
City-St-Zip: SUN CITY CENTER, FL 33573

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: LOREN HOFER PO 04/24/2009

Electronic Signature of Signing Officer or Director — Date