

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756848

FILED
Apr 11, 2007
Secretary of State

Entity Name: THE GOVERNORS CLUB, INC.

Current Principal Place of Business:

202 1/2 S ADAMS ST
P.O. BOX 10568
TALLAHASSEE, FL 32302

New Principal Place of Business:

202 1/2 S ADAMS ST
TALLAHASSEE, FL 32301

Current Mailing Address:

202 1/2 S ADAMS ST
P.O. BOX 10568
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 59-2118294 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERMAN, BARRY J
7972 BERNARD STREET
TALLAHASSEE, FL 32317 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: P () Delete
Name: PADGETT, DIANA
Address: 1371 MILLSTREAM ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: VCD () Delete
Name: ZIFFER, GIL
Address: 525 NORTH CALHOUN STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: VSD () Delete
Name: HOWELL, WINSTON K
Address: 8004 EVENING STAR LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VCD () Delete
Name: PHILLIPS, KAREN
Address: 4352 BENCHMARK TRACE
City-St-Zip: TALLAHASSEE, FL 32317

Title: VCD () Delete
Name: BISHOP, BARNEY T
Address: 10976 LUNA POINT ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: VCD () Delete
Name: REYES, ROBERT
Address: 2050 FLORIDA AVENUE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: DIANA PADGETT

P

04/11/2007

Electronic Signature of Signing Officer or Director

_____ Date