

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765906

FILED  
Mar 10, 2011  
Secretary of State

**Entity Name:** EASTPOINTE COUNTRY CLUB CHARITY FUND, INC.

**Current Principal Place of Business:**

13535 EASTPOINTE BLVD.  
PALM BEACH GARDENS, FL 334181414

**New Principal Place of Business:**

**Current Mailing Address:**

13535 EASTPOINTE BLVD.  
PALM BEACH GARDENS, FL 334181414

**New Mailing Address:**

FEI Number: 59-2252755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HANSON, THERESA  
13535 EASTPOINTE 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: PRES  
Name: ALEXANDER, AILEEN  
Address: 13535 EASTPOINTE BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S,T  
Name: OLIN, SHIRLEY  
Address: 13535 EASTPOINTE BLVD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

SIGNATURE: AILEEN ALEXANDER

PRES

03/10/2011

Electronic Signature of Signing Officer or Director

Date