2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11496

FILED May 18, 2007 Secretary of State

-	e: MIDDLE RIVER CLUB, INC.	
Current Pri	ncipal Place of Business:	New Principal Place of Business:
	6TH AVENUE PARK, FL 33334	
Current Ma	iling Address:	New Mailing Address:
	6TH AVENUE PARK, FL 33334	
	e with s. 607.193(2)(b), F.S., the corporation did not receive t	·
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	IANCY TH DEVON-OFFICE PARK, FL 33334 US	FEENAN, NANCY 3000 N.E. 16TH AVE. 4TH FLOOR OAKLAND PARK, FL 333334 US
The above in the State		of changing its registered office or registered agent, or both,
SIGNATUR	E: NANCY FEENAN	05/18/2007
	Electronic Signature of Registered Agent	Date
OFFICERS	AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
OFFICERS Title: Name: Address: City-St-Zip:	AND DIRECTORS: PD () Delete FEENAN, NANCY 3020 N.E. 16TH AVE. #E208 OAKLAND PARK, FL 33334	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address:	PD () Delete FEENAN, NANCY 3020 N.E. 16TH AVE. #E208	Title: () Change () Addition Name: Address:
Title: Name: Address: City-St-Zip: Title: Name: Address:	PD () Delete FEENAN, NANCY 3020 N.E. 16TH AVE. #E208 OAKLAND PARK, FL 33334 VPD () Delete WILLARD, HAROLD 3060 N.E.16TH AVE. #H101	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	PD () Delete FEENAN, NANCY 3020 N.E. 16TH AVE. #E208 OAKLAND PARK, FL 33334 VPD () Delete WILLARD, HAROLD 3060 N.E.16TH AVE. #H101 OAKLAND PARK, FL 33334 TD () Delete ESQUENAZI, CRAIG 3060 N.E. 16TH AVE. #H103	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 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: NANCY FEENAN PD 05/18/2007