## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20204

FILED Jan 09, 2009 Secretary of State

Entity Name: MANDARIN COMMUNITY CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

12447 MANDARIN RD.

JACKSONVILLE, FL 32257 US

Current Mailing Address: New Mailing Address:

12447 MANDARIN RD.

JACKSONVILLE, FL 32257 US

FEI Number: 59-2367544 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CONART, MARK

11655 BRADY ROAD

C/O 12447 MANDARIM ROAD

JACKSONVILLE, FL 32223 US

COWART, MARK

11655 BRADY ROAD

C/O 12447 MANDARIN ROAD

JACKSONVILLE, FL 32223 US

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: MARK COWART 01/09/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SCOTT, SUSIE
 Name:

 Address:
 13200 MANDARIN RD.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CORRADO, PAT
 Name:

 Address:
 12709 MANDARIN RD.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 WOLFE, BETTY
 Name:
 WOLFE, BETTY

 Address:
 3345 RERWICK DR. S
 Address:
 3345 PICKWICK DR. S

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32257

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 BOSNORTH, WANDA
 Name:
 BOSWORTH, WANDA

 Address:
 12222 GOVENORS DR. E.
 Address:
 12222 GOVERNORS DR. E.

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:
 JACKSONVILLE, FL 32223

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: SUSIE SCOTT PRES 01/09/2009